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INTRODUCTION

The Illinois Register is the official state document for publishing public notice of rulemaking activity initiated by State governmental agencies. The table of contents is arranged categorically by rulemaking activity and alphabetically by agency within each category. Rulemaking activity consists of proposed or adopted new rules; amendments to or repealers of existing rules; and rules promulgated by emergency or peremptory action. Executive Orders and Proclamations issued by the Governor; notices of public information required by State Statute; and activities (meeting agendas; Statements of Objection or Recommendation, etc.) of the Joint Committee on Administrative Rules (JCAR), a legislative oversight committee which monitors the rulemaking activities of State Agencies; is also published in the Register. The Register is a weekly update of the Illinois Administrative Code (a compilation of the rules adopted by State agencies). The most recent edition of the Code, along with the Register, comprise the most current accounting of State agencies' rulemakings. The Illinois Register is the property of the State of Illinois, granted by the authority of the Illinois Administrative Procedure Act [5 ILCS 100/1-1, et seq.].

ILLINOIS REGISTER PUBLICATION SCHEDULE FOR 2010

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**Editor's Note:** This is a reminder that January 4, 2010 is the final day to submit your Agency's Regulatory Agenda for the January 2010 filing period.
DEPARTMENT OF EMPLOYMENT SECURITY

NOTICE OF PROPOSED AMENDMENT

1) Heading of the Part: Recovery Of Benefits

2) Code Citation: 56 Ill. Adm. Code 2835

3) Section Number: Proposed Action:
   2835.100 New

4) Statutory Authority: 820 ILCS 405/601, 900, 901, 1700 and 1706

5) A Complete Description of the Subjects and Issues Involved: The proposed rulemaking explains the techniques used by the Department for detecting benefit fraud and the ramifications of such fraud.

6) Any published studies or reports, along with the sources of underlying data, that were used when composing this rulemaking: None

7) Will this rulemaking replace any emergency rulemaking currently in effect? Yes

8) Does this rulemaking contain an automatic repeal date? No

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives: This rulemaking does not create or expand a State mandate.

12) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may submit written comments to:

Gregory J. Ramel, Deputy Legal Counsel
Illinois Department of Employment Security
33 South State Street – Room 937
Chicago, IL 60603

Phone: 312-793-4240
Fax: 312-793-5645
e-mail: gregory.ramel@illinois.gov
DEPARTMENT OF EMPLOYMENT SECURITY

NOTICE OF PROPOSED AMENDMENT

The Department requests the submission of written comments within 45 days after the publication of this Notice. The Department will consider all written comments it receives during the First Notice period as required by Section 5-40 of the Illinois Administrative Procedure Act [5 ILCS 100/5-40].

The proposed rulemaking has no direct impact on small businesses, small municipalities and not for profit corporations as defined in Sections 1-75, 1-80 and 1-85 of the Illinois Administrative Procedure Act [5 ILCS 100/1-75, 1-80 and 1-85]. These entities may submit comments in writing to the Department at the above address in accordance with the regulatory flexibility provisions in Section 5-30 of the Illinois Administrative Procedure Act [5 ILCS 100/5-30]. These entities shall indicate their status as a small business, small municipality or not-for-profit corporation as part of any written comments submitted to the Department.

13) Initial Regulatory Flexibility Analysis:

A) Types of small business, small municipalities and not for profit corporations affected: The proposed rulemaking has no direct impact on small businesses, small municipalities and not for profit corporations.

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

14) Regulatory Agenda on which this rulemaking was summarized: None, mandated by statutory amendment which requires the Department to initiate rulemaking.

The full text of the Proposed Amendment is identical to that of the Emergency Amendment of this Part, and can be found in this issue of the Illinois Register on page 2330:
DEPARTMENT OF EMPLOYMENT SECURITY

NOTICE OF PROPOSED AMENDMENT

1) **Heading of the Part:** Claimant’s Reason For Separation From Work

2) **Code Citation:** 56 Ill. Adm. Code 2840

3) **Section Number:** 2840.101  

**Proposed Action:** New

4) **Statutory Authority:** 820 ILCS 405/601, 602, 1700 and 1701

5) **A Complete Description of the Subjects and Issues Involved:** The proposed rulemaking explains the principles to be applied in interpreting the provisions of Section 601 of the Act involving voluntary leaving.

6) **Any published studies or reports, along with the sources of underlying data, that were used when composing this rulemaking:** None

7) **Will this rulemaking replace any emergency rulemaking currently in effect?** Yes

8) **Does this rulemaking contain an automatic repeal date?** No

9) **Does this rulemaking contain incorporations by reference?** No

10) **Are there any other proposed rulemakings pending on this Part?** No

11) **Statement of Statewide Policy Objectives:** This rulemaking does not create or expand a State mandate.

12) **Time, Place, and Manner in which interested persons may comment on this proposed rulemaking:** Interested persons may submit written comments to:

    Gregory J. Ramel, Deputy Legal Counsel  
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DEPARTMENT OF EMPLOYMENT SECURITY

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13) Initial Regulatory Flexibility Analysis:

A) Types of small business, small municipalities and not for profit corporations affected: The proposed rulemaking has no direct impact on small businesses, small municipalities and not for profit corporations.

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

14) Regulatory Agenda on which this rulemaking was summarized: None, mandated by statutory amendment which requires the Department to initiate rulemaking.

The full text of the Proposed Amendment is identical to that of the Emergency Amendment of this Part, and can be found in this issue of the Illinois Register on page 2335:
NOTICE OF PROPOSED AMENDMENTS

1) **Heading of the Part:** Definitions and General Provisions

2) **Code Citation:** 35 Ill. Adm. Code 211

3) **Section Numbers:**

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4) **Statutory Authority:** Implementing Sections 21, 22, 22.01 and 22.9, and authorized by Section 27 of the Environmental Protection Act [415 ILCS 5/21, 22, 22.01, 22.9, 27]

5) **A complete description of the subjects and issues involved:** The Illinois Environmental Protection Agency (Agency) proposed this rulemaking to satisfy Illinois' obligation to submit a State Implementation Plan addressing Clean Air Act requirements for sources of
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

volatile organic material (VOM) emissions in ozone nonattainment areas. The United States Environmental Protection Agency (USEPA) issued Control Techniques Guidelines (CTG) for Group II Consumer and Commercial Product Categories. In the CTG, USEPA recommended control measures that it believes constitute reasonably available control technology (RACT) for those product categories.

In Part 211, the Agency proposes adding twenty-three new definitions and amending four existing definitions for terms employed in proposed amendments to Parts 218 and 219.


6) Published studies or reports, and sources of underlying data, used to compose this rulemaking:

The Agency's regulatory proposal included a Technical Support Document, which stated that it relied on sources listed below. Copies of the documents the Illinois EPA relied upon are available for review with the Pollution Control Board.


POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS


7) Will this rulemaking replace any emergency rulemakings currently in effect? No

8) Does this rulemaking contain an automatic repeal date? No

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other amendments pending on this Part? Yes

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11) Statement of Statewide Policy Objectives: This proposed rule does not create or enlarge a State mandate, as defined in Section 3(b) of the State Mandates Act. [30 ILCS 805/3(b) (2008)].

12) Time, place and manner in which interested persons may comment on this proposed rulemaking: The Board will accept written public comment on this proposal for a period of 45 days after the date of this publication. Comments should reference docket R10-08 and be addressed to:

   Clerk's Office
   Illinois Pollution Control Board
   State of Illinois Center, Suite 11-500
   100 W. Randolph St.
   Chicago, IL 60601

Address all questions to Tim Fox at 312-814-6085.
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

Interested persons may request copies of the Board's opinion and order by calling the Clerk's office at 312-814-3620, or download them from the Board's Web site at www.ipcb.state.il.us.

13) Initial regulatory flexibility analysis:

A) Types of small businesses, small municipalities, and not-for-profit corporations affected: This rulemaking will impact any small business, small municipality, an not-for-profit corporation that falls within one of the Group III Product Categories and meets the applicability thresholds specified in the proposed rules.

B) Reporting, bookkeeping or other procedures required for compliance: The proposed rules require that the owner or operator of a subject source perform emissions monitoring, submit certifications, complete required tests, and maintain records and maker reports as required.

C) Types of professional skills necessary for compliance: No professional skills beyond those currently required by the existing state and federal air pollution control requirements applicable to affected sources will be required.

14) Regulatory Agenda on which this rulemaking was summarized: January 2009

The full text of the Proposed Amendments begins on the next page:
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

TITLE 35: ENVIRONMENTAL PROTECTION
SUBTITLE B: AIR POLLUTION
CHAPTER I: POLLUTION CONTROL BOARD
SUBCHAPTER c: EMISSION STANDARDS AND LIMITATIONS
FOR STATIONARY SOURCES

PART 211
DEFINITIONS AND GENERAL PROVISIONS

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Section
211.101  Incorporations by Reference
211.102  Abbreviations and Conversion Factors

SUBPART B: DEFINITIONS

Section
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211.122  Definitions (Repealed)
211.130  Accelacota
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211.170  Acid Gases
211.210  Actual Heat Input
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211.270  Aerosol Can Filling Line
211.290  Afterburner
211.310  Air Contaminant
211.330  Air Dried Coatings
211.350  Air Oxidation Process
211.370  Air Pollutant
211.390  Air Pollution
211.410  Air Pollution Control Equipment
211.430  Air Suspension Coater/Dryer
211.450  Airless Spray
211.470  Air Assisted Airless Spray
211.474  Alcohol
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

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211.484  Animal
211.485  Animal Pathological Waste
211.490  Annual Grain Through-Put
211.495  Anti-Glare/Safety Coating
211.510  Application Area
211.530  Architectural Coating
211.550  As Applied
211.560  As-Applied Fountain Solution
211.570  Asphalt
211.590  Asphalt Prime Coat
211.610  Automobile
211.630  Automobile or Light-Duty Truck Assembly Source or Automobile or Light-Duty Truck Manufacturing Plant
211.650  Automobile or Light-Duty Truck Refinishing
211.660  Automotive/Transportation Plastic Parts
211.665  Auxiliary Boiler
211.670  Baked Coatings
211.680  Bakery Oven
211.685  Basecoat/Clearcoat System
211.690  Batch Loading
211.695  Batch Operation
211.696  Batch Process Train
211.710  Bead-Dipping
211.730  Binders
211.740  Brakehorsepower (rated-bhp)
211.750  British Thermal Unit
211.770  Brush or Wipe Coating
211.790  Bulk Gasoline Plant
211.810  Bulk Gasoline Terminal
211.820  Business Machine Plastic Parts
211.830  Can
211.850  Can Coating
211.870  Can Coating Line
211.890  Capture
211.910  Capture Device
211.930  Capture Efficiency
211.950  Capture System
211.953  Carbon Adsorber
POLLUTION CONTROL BOARD

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211.7310    Wood Furniture Coating
211.7330    Wood Furniture Coating Line
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211.7400    Yeast Percentage

211.APPENDIX A    Rule into Section Table
211.APPENDIX B    Section into Rule Table

AUTHORITY: Implementing Sections 9, 9.1, 9.9 and 10 and authorized by Sections 27 of the Environmental Protection Act [415 ILCS 5/9, 9.1, 9.9, 10, 27].

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SUBPART B: DEFINITIONS

Section 211.1000  Class II Finish

"Class II Finish" means a finish that meets the specifications of Voluntary Product Standard PS-59-73, as approved by the American National Standards Institute.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.1745  Digital Printing

"Digital Printing" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, the transfer of electronic files directly from a computer to an electronically driven output device that prints the image directly on the selected media (substrate). Printing using home and office equipment is excluded from this definition.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.1878  Electrical Apparatus Component

"Electrical Apparatus Component" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, an internal component such as wires, windings, stators, rotors, magnets, contacts, relays, energizers, and connections in an apparatus that generates or transmits electrical energy, including, but not limited to, alternators, generators, transformers, electric motors, cables, and circuit breakers, except for the actual cabinet in which the components are housed. Electrical
components of graphic arts application equipment and hot-line tools are also included in this category.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.1885  Electronic Component

"Electronic Component" means, for the purposes of 35 Ill. Adm. Code 218.182(f), and 219.182(f), 218.187, and 219.187, all portions of an electronic assembly, including, but not limited to, circuit board assemblies, printed wire assemblies, printed circuit boards, soldered joints, ground wires, bus bars, and associated electronic component manufacturing equipment such as screens and filters, except for the actual cabinet in which the components are housed.

(Source: Amended at 34 Ill. Reg. _____, effective ____________)

Section 211.2358  Flat Wood Paneling

"Flat Wood Paneling" means natural finish hardwood plywood panels, hardwood panels with Class II finishes, tileboard, exterior siding, and printed interior panels made of hardwood, plywood, or thin particleboard.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.2359  Flat Wood Paneling Coating Line

"Flat Wood Paneling Coating Line" means a coating line in which any protective, decorative, or functional coating is applied to flat wood paneling.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.2368  Flexible Packaging

"Flexible Packaging" means any package or part of a package, the shape of which can be readily changed. Flexible packaging includes, but is not limited to, bags, pouches, liners, and wraps utilizing paper, plastic, film, aluminum foil, metalized or coated paper or film, or any combination of these materials. Shrink-wrap labels or wrappers (but not self-adhesive labels) printed on or in-line with a flexible packaging printing press are also considered to be flexible packaging. Flexible packaging does not include folding cartons, gift wraps, hot stamp foils, wall coverings, vinyl products, decorative laminates, floor coverings, or tissue products.
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(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 211.2615 General Work Surface

"General Work Surface" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, an area of a medical device or pharmaceutical manufacturing facility where solvent cleaning is performed on work surfaces, but for which cleaning specifications are not required to be maintained in accordance with criteria and procedures established to meet requirements of the United States Food and Drug Administration and/or other applicable regulatory agencies with authority over manufacturing operations for medical devices and/or pharmaceuticals. General work surfaces shall not include items defined under "Janitorial Cleaning".

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 211.2830 Heatset

"Heatset" means a class of lithography or letterpress that requires a heated dryer to solidify the printing inks.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 211.2840 Heatset Web Letterpress Printing Line

"Heatset Web Letterpress Printing Line" means a letterpress printing line in which a continuous roll of substrate is fed through the printing press and an oven is used to solidify the printing inks.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 211.2965 High Precision Optic

"High Precision Optic" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, an optical element used in an electro-optical device that is designed to sense, detect, or transmit light energy, including specific wavelengths of light energy and changes in light energy levels.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 211.3215 Janitorial Cleaning
"Janitorial Cleaning" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, the cleaning of building or facility components, including, but not limited to, floors, ceilings, walls, windows, doors, stairs, bathrooms, furnishings, and exterior surfaces of office equipment, and excludes the cleaning of work areas where manufacturing or repair activity is performed.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.3305 Letterpress Printing Line

"Letterpress Printing Line" means a web or sheetfed printing line that does not constitute a flexographic printing line, in which the image area is raised relative to the non-image area and the ink is transferred to the substrate directly from the image surface.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.3555 Maintenance Cleaning

"Maintenance Cleaning" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, a solvent cleaning operation or activity carried out to ensure that general work areas where manufacturing or repair activity is performed remain clean, and to clean tools, machinery, molds, forms, jigs, and equipment. This definition does not include the cleaning of coatings, adhesives, or ink application equipment.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.3705 Medical Device

"Medical Device" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, an instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent or other similar article, including any component or accessory, that meets one or more of the following conditions:

a) it is intended for use in the diagnosis of disease or other conditions, or in the cure, mitigation, treatment, or prevention of disease;

b) it is intended to affect the structure or any function of the body; or

c) it is defined in the National Formulary or the United States Pharmacopeia, or any supplement to them.
Section 211.3707  Medical Device and Pharmaceutical Manufacturing

"Medical Device and Pharmaceutical Manufacturing" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, the collection of equipment and activities to prepare, utilize, maintain, and repair work areas, in order to accomplish one or more steps in preparing a medical device or pharmaceutical for its intended use. Manufacturing is typically, but not always, conducted in accordance with criteria and procedures established to meet requirements of the United States Food and Drug Administration and/or other applicable regulatory agencies with authority over manufacturing operations for global sales of medical devices and/or pharmaceuticals. Work areas and equipment shall include all machinery, tools, equipment, rooms, tables, countertops, and facilities for maintaining employee health and safety that are subject to such criteria and procedures.

Section 211.4065  Non-Heatset

"Non-heatset" means a class of lithography or letterpress that which does not require a heated dryer to solidify the printing inks. Ultraviolet-cured and electron beam-cured inks are considered non-heatset.

Section 211.5335  Radiation Effect Coating

"Radiation Effect Coating" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, a coating or coating system engineered to interact, through absorption or reflection, with specific regions of the electromagnetic energy spectrum, such as the ultraviolet, visible, infrared, or microwave regions. Uses include, but are not limited to, lightning strike protection, electromagnetic pulse protection, and radar avoidance. Coatings that have been designated "classified" by the Department of Defense are not included in this definition.

Section 211.5535  Repair Cleaning
"Repair Cleaning" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, a solvent cleaning operation or activity carried out during a repair process.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

**Section 211.5585 Research and Development Operation**

"Research and Development Operation" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, an operation whose purpose is for research and development of new processes and products, that is conducted under the close supervision of technically trained personnel, and that is not involved in the manufacture of final or intermediate products for commercial purposes, except in a de minimis manner.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

**Section 211.5860 Scientific Instrument**

"Scientific Instrument" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, an instrument, including the components, assemblies, and subassemblies used in their manufacture, and associated accessories and reagents that are used for the detection, measurement, analysis, separation, synthesis, or sequencing of various compounds.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

**Section 211.5875 Screen Printing**

"Screen Printing" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, a process in which the printing ink passes through a taut screen or fabric to which a refined form of stencil has been applied. The stencil openings determine the form and dimensions of the imprint.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

**Section 211.5885 Screen Reclamation**

"Screen Reclamation" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, a solvent cleaning activity carried out in a screen printing operation in which the screen is completely cleaned and the stencil removed for recycling or reuse of the screen for other production runs.

(Source: Added at 34 Ill. Reg. ______, effective ____________)
Section 211.6405 Sterilization Indicating Ink

"Sterilization Indicating Ink" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, an ink that changes color to indicate that sterilization has occurred. Such ink is used to monitor the sterilization of medical instruments, autoclave efficiency, and the thermal processing of foods for prevention of spoilage.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.6425 Stripping


(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.6535 Surface Preparation

"Surface Preparation" means, for purposes of 35 Ill. Adm. Code 218.187 and 219.187, the removal of contaminants such as dust, soil, oil, and grease prior to coating, adhesive, or ink applications.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 211.7290 Wood Furniture

"Wood furniture" means room furnishings, including cabinets (kitchen, bath and vanity), tables, chairs, beds, sofas, shutters, art objects, wood paneling other than flat wood paneling, wood flooring and any other coated furnishings made of wood, wood composition or fabricated wood materials.

(Source: Amended at 34 Ill. Reg. _____, effective ____________)
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1) **Heading of the Part:** Organic Material Emission Standards and Limitations for the Chicago Area

2) **Code Citation:** 35 Ill. Adm. Code 218

3) **Section Numbers:**

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<thead>
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<td>218.106</td>
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4) **Statutory authority:** Implementing Sections 21, 22, 22.01 and 22.9, and authorized by Section 27 of the Environmental Protection Act [415 ILCS 5/21, 22, 22.01, 22.9, 27]

5) **A complete description of the subjects and issues involved:** The Illinois Environmental Protection Agency (Agency) proposed this rulemaking to satisfy Illinois' obligation to submit a State Implementation Plan addressing Clean Air Act requirements for sources of
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volatile organic material (VOM) emissions in ozone nonattainment areas. The United States Environmental Protection Agency (USEPA) issued Control Techniques Guidelines (CTG) for Group II Consumer and Commercial Product Categories. In the CTG, USEPA recommended control measures that it believes constitute reasonably available control technology (RACT) for those product categories.


6) Published studies or reports, and sources of underlying data, used to compose this rulemaking:

The Agency's regulatory proposal included a Technical Support Document, which stated that it relied on sources listed below. Copies of the documents the Agency relied upon are available for review with the Pollution Control Board.


Control Techniques Guideline Series: Control of Volatile Organic Compound Emissions from Offset Lithographic Printing (DRAFT), United States Environmental Protection
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7) Will this rulemaking replace any emergency rulemaking currently in effect? No

8) Does this rulemaking contain an automatic repeal date? No

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other amendments pending on this Part? Yes

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<th>Illinois Register Citation:</th>
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11) Statement of Statewide Policy Objectives: This proposed rule does not create or enlarge a State mandate, as defined in Section 3(b) of the State Mandates Act [30 ILCS 805/3(b) (2008)].

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: The Board will accept written public comment on this proposal for a period of 45 days after the date of this publication. Comments should reference docket R10-08 and be addressed to:

   Clerk's Office
   Illinois Pollution Control Board
   State of Illinois Center, Suite 11-500
   100 W. Randolph St.
   Chicago, IL 60601

   Address all questions to Tim Fox at 312-814-6085.
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Interested persons may request copies of the Board's opinion and order by calling the Clerk's office at 312-814-3620, or download them from the Board's Web site at www.ipcb.state.il.us.

13) Initial regulatory flexibility analysis:

   A) Types of small businesses, small municipalities, and not-for-profit corporations affected: This rulemaking will impact any small business, small municipality, and not-for-profit corporation that falls within one of the Group III Product Categories and meets the applicability thresholds specified in the proposed rules.

   B) Reporting, bookkeeping or other procedures required for compliance: The proposed rules require that the owner or operator of a subject source perform emissions monitoring, submit certifications, complete required tests, and maintain records and maker reports as required.

   C) Types of professional skills necessary for compliance: No professional skills beyond those currently required by the existing state and federal air pollution control requirements applicable to affected sources will be required.

14) Regulatory Agenda on which this rulemaking was summarized: January 2009

The full text of the Proposed Amendments begins on the next page:
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TITLE 35: ENVIRONMENTAL PROTECTION
SUBTITLE B: AIR POLLUTION
CHAPTER I: POLLUTION CONTROL BOARD
SUBCHAPTER c: EMISSIONS STANDARDS AND LIMITATIONS FOR STATIONARY SOURCES

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218.APPENDIX B VOM Measurement Techniques for Capture Efficiency (Repealed)
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218.APPENDIX G TRE Index Measurements for SOCMI Reactors and Distillation Units
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AUTHORITY: Implementing Section 10 and authorized by Sections 27 and 28 of the Environmental Protection Act [415 ILCS 5/10, 27, and 28].

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SUBPART A: GENERAL PROVISIONS

Section 218.106 Compliance Dates

a) Except as otherwise provided in this Section or as otherwise provided in a specific Subpart of this Part, compliance with the requirements of all rules is required by July 1, 1991, or September 1, 1991, for all sources located in Cook, DuPage, Kane, Lake, McHenry, or Will Counties, consistent with the appropriate provisions of Section 218.103 of this Subpart.

b) Except as otherwise provided in this Section or as otherwise provided in a specific Subpart of this Part, compliance with the requirements of this Part is required by November 15, 1993, for all sources located in Aux Sable Township or Goose Lake Township in Grundy County, or in Oswego Township in Kendall County.

c) All emission units which meet the applicability requirements of Sections 218.402(a)(2), 218.611(b), 218.620(b), 218.660(a), 218.680(a), 218.920(b), 218.940(b), 218.960(b) or 218.980(b) of this Part, including emission units at sources which are excluded from the applicability criteria of Sections 218.402(a)(1), 218.611(a), 218.620(a), 218.920(a), 218.940(a), 218.960(a), or 218.980(a) of this Part by virtue of permit conditions or other enforceable means, must comply with the requirements of Subparts H, Z, AA, CC, DD, PP, QQ, RR or TT of this Part, respectively, by March 15, 1995. Any owner or operator of an emission unit which has already met the applicability requirements of Sections 218.402(a)(1), 218.611(a), 218.620(a), 218.920(a), 218.940(a), 218.960(a) or 218.980(a) of this Part or by the effective date of this subsection is required to comply with all compliance dates or schedules found in Sections 218.106(a) or 218.106(b), as applicable.

d) Any owner or operator of a source with an emission unit subject to the requirements of Section 218.204(m)(2) or (m)(3) of this Part shall comply with those requirements by March 25, 1995.

e) Any owner or operator of a source subject to the requirements of Section
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218.204(p) of this Part shall comply with the requirements in Section 218.204(p), as well as all applicable requirements in Sections 218.205 through 218.211, 218.214, and 218.217 by May 1, 2010.

(Source: Amended at 34 Ill. Reg. _____, effective _____________)

SUBPART E: SOLVENT CLEANING

Section 218.181 Solvent Cleaning Degreasing Operations in General

The requirements of Sections 218.182, 218.183, 218.184, and 218.186 of this Subpart shall apply to all cold cleaning, open top vapor degreasing, and conveyorized degreasing operations which use volatile organic materials.

(Source: Amended at 34 Ill. Reg. _____, effective _____________)

Section 218.187 Other Industrial Solvent Cleaning Operations

a) Applicability. On and after April 1, 2011:

1) Except as provided in subsection (a)(2) of this Section, the requirements of this Section shall apply to all cleaning operations that use organic materials sources that emit a total of 6.8 kg/day (15 lbs/day) or more of VOM from cleaning operations at the source, in the absence of air pollution control equipment. For purposes of this Section, "cleaning operation" means the process of cleaning products, product components, tools, equipment, or general work areas during production, repair, maintenance, or servicing, including but not limited to spray gun cleaning, spray booth cleaning, large and small manufactured components cleaning, parts cleaning, equipment cleaning, line cleaning, floor cleaning, and tank cleaning, at sources with emission units:

2) Notwithstanding subsection (a)(1) of this Section:

A) The following cleaning operations shall be exempt from the requirements of subsections (b), (c), (d), (f), and (g) of this Section:
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i) Cleaning operations subject to the limitations in Sections 218.182, 218.183, or 218.184;

ii) Janitorial cleaning;

iii) Stripping of cured coatings, inks, or adhesives, including screen reclamation activities;

iv) Cleaning operations in printing pre-press areas, including the cleaning of film processors, color scanners, plate processors, film cleaning, and plate cleaning;

B) Cleaning operations for emission units within the following source categories shall be exempt from the requirements of subsections (b), (c), (d), (f), and (g) of this Section:

i) Aerospace coating;

ii) Flexible package printing;

iii) Lithographic printing;

iv) Letterpress printing;

v) Flat wood paneling coating;

vi) Large appliance coating;

vii) Metal furniture coating;

viii) Paper, film, and foil coating;

ix) Wood furniture coating;

x) Shipbuilding and repair coating;

xi) Plastic parts coating;

xii) Miscellaneous metal parts coating;
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xiii) Fiberglass boat manufacturing;

xiv) Miscellaneous industrial adhesives; and

xv) Auto and light-duty truck assembly coating;

C) The following cleaning operations shall be exempt from the requirements of subsections (b), (c), (f), and (g) of this Section:

i) Cleaning of solar cells, laser hardware, scientific instruments, and high-precision optics;

ii) Cleaning conducted as part of performance laboratory tests on coatings, adhesives, or inks; research and development operations; or laboratory tests in quality assurance laboratories;

iii) Cleaning of paper-based gaskets and clutch assemblies where rubber is bonded to metal by means of an adhesive;

iv) Cleaning of cotton swabs to remove cottonseed oil before cleaning of high-precision optics;

v) Cleaning of medical device and pharmaceutical manufacturing facilities using no more than 1.5 gallons per day of solvents;

vi) Cleaning of adhesive application equipment used for thin metal laminating;

vii) Cleaning of electronic or electrical cables;

viii) Touch-up cleaning performed on printed circuit boards where surface mounted devices have already been attached;

ix) Cleaning of coating and adhesive application processes utilized to manufacture transdermal drug delivery products using no more than three gallons per day of ethyl acetate;
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x) Cleaning of application equipment used to apply coatings on satellites and radiation effect coatings;

xi) Cleaning of application equipment used to apply solvent-borne fluoropolymer coatings;

xii) Cleaning of ultraviolet or electron beam adhesive application;

xiii) Cleaning of sterilization indicating ink application equipment if the facility uses no more than 1.5 gallons per day of solvents for such cleaning;

xiv) Cleaning of metering rollers, dampening rollers, and printing plates;

xv) Cleaning of numismatic dies; and

xvi) Cleaning operations associated with digital printing.

b) Material and Control Requirements. No owner or operator of a source subject to this Section shall perform any cleaning operation subject to this Section unless the owner or operator meets the requirements in subsection (b)(1), (b)(2), or (b)(3):

1) The VOM content of the as-used cleaning solutions (minus water and any compounds that are specifically exempted from the definitions of VOM) does not exceed the following emissions limitations:

A) Product cleaning during manufacturing process or surface preparation for coating, adhesive, or ink application:

i) Electrical apparatus components and electronic components kg/l lb/gal

   0.10  0.83

ii) Medical device and pharmaceutical manufacturing

   0.80  6.7
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B) Repair and maintenance cleaning:

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<th>kg/l</th>
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<tr>
<td>i) Electrical apparatus components and electronic components</td>
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<td>0.10</td>
<td>0.83</td>
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<tr>
<td>ii) Medical device and pharmaceutical manufacturing</td>
<td></td>
<td>0.80</td>
<td>6.7</td>
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<tr>
<td>iii) Medical device and pharmaceutical manufacturing general work surfaces</td>
<td></td>
<td>0.60</td>
<td>5.0</td>
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C) Cleaning of ink application equipment:

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<th>kg/l</th>
<th>lb/gal</th>
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</thead>
<tbody>
<tr>
<td>i) Rotogravure printing that does not print flexible packaging</td>
<td></td>
<td>0.10</td>
<td>0.83</td>
</tr>
<tr>
<td>ii) Screen printing</td>
<td></td>
<td>0.50</td>
<td>4.2</td>
</tr>
<tr>
<td>iii) Ultraviolet ink and electron beam ink application equipment, except screen printing</td>
<td></td>
<td>0.65</td>
<td>5.4</td>
</tr>
<tr>
<td>iv) Flexographic printing that does not print flexible packaging</td>
<td></td>
<td>0.10</td>
<td>0.83</td>
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D) All other cleaning operations not subject to a specific limitation in subsections (b)(1)(A) through (b)(1)(C) of this Section

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<th>kg/l</th>
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<tr>
<td></td>
<td></td>
<td>0.050</td>
<td>0.42</td>
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</table>

2) The composite vapor pressure of each as-used cleaning solution used does not exceed 8.0 mmHg measured at 20°C (68°F); or
3) An afterburner or carbon adsorber is installed and operated that reduces VOM emissions from the subject cleaning operation by at least 85 percent overall. The owner or operator may use an emissions control system other than an afterburner or carbon adsorber if such device reduces VOM emissions from the subject cleaning operation by at least 85 percent overall, the owner or operator submits a plan to the Agency detailing appropriate monitoring devices, test methods, recordkeeping requirements, and operating parameters for such control device, and such plan is approved by the Agency and USEPA within federally enforceable permit conditions.

c) The owner or operator of a subject source shall demonstrate compliance with this Section by using the applicable test methods and procedures specified in subsection (g) of this Section and by complying with the recordkeeping and reporting requirements specified in subsection (e) of this Section.

d) Operating Requirements. The owner or operator of a source subject to the requirements of this Section shall comply with the following for each subject cleaning operation:

1) Cover open containers and properly cover and store applicators used to apply cleaning solvents;

2) Minimize air circulation around the cleaning operation;

3) Dispose of all used cleaning solutions, cleaning towels, and applicators used to apply cleaning solvents in closed containers;

4) Utilize equipment practices that minimize emissions.

e) Recordkeeping and Reporting Requirements.

1) The owner or operator of a source exempt from the limitations of this Section because of the criteria in Section 218.187(a)(1) of this Subpart shall comply with the following:

A) By April 1, 2011, or upon initial start-up of the source, whichever is later, submit a certification to the Agency that includes:
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i) A declaration that the source is exempt from the requirements of this Section because of the criteria in Section 218.187(a)(1);

ii) Calculations that demonstrate that combined emissions of VOM from cleaning operations at the source never equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment;

B) Notify the Agency of any record that shows that the combined emissions of VOM from cleaning operations at the source ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, within 30 days after the event occurs.

2) All sources subject to the requirements of this Section shall:

A) By April 1, 2011, or upon initial start-up of the source, whichever is later, submit a certification to the Agency that includes:

i) A declaration that all subject cleaning operations are in compliance with the requirements of this Section;

ii) Identification of each subject cleaning operation and each VOM-containing cleaning solution used as of the date of certification in such operation;

iii) If complying with the emissions control system requirement, what type of emissions control system will be used;

iv) Initial documentation that each subject cleaning operation will comply with the applicable limitation, including copies of manufacturer's specifications, test results (if any), formulation data, and calculations;

v) Identification of the methods that will be used to demonstrate continuing compliance with the applicable limitations;
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vi) A description of the practices and procedures that the source will follow to ensure compliance with the limitations in Section 218.187(d); and

vii) A description of each cleaning operation exempt pursuant to Section 218.187(a)(2), if any, and a listing of the emission units on which the exempt cleaning operation is performed;

B) At least 30 calendar days before changing the method of compliance between subsections (b)(1) or (b)(2) and subsection (b)(3) of this Section, notify the Agency in writing of such change. The notification shall include a demonstration of compliance with the newly applicable subsection;

3) All sources complying with this Section pursuant to the requirements of subsection (b)(1) of this Section shall collect and record the following information for each cleaning solution used:

A) For each cleaning solution that is prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) The VOM content of each cleaning solvent in the cleaning solution;

iii) Each change to the setting of the automatic equipment, with date, time, description of changes in the cleaning solution constituents (e.g., cleaning solvents), and a description of changes to the proportion of cleaning solvent and water (or other non-VOM);

iv) The proportion of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution;

v) The VOM content of the as-used cleaning solution, with supporting calculations; and
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vi) A calibration log for the automatic equipment, detailing periodic checks;

B) For each batch of cleaning solution that is not prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) Date, time of preparation, and each subsequent modification of the batch;

iii) The VOM content of each cleaning solvent in the cleaning solution;

iv) The total amount of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution; and

v) The VOM content of the as-used cleaning solution, with supporting calculations. For cleaning solutions that are not prepared at the site but are used as purchased, the manufacturer's specifications for VOM content may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 218.105(a) of this Part;

4) All sources complying with this Section pursuant to the requirements of subsection (b)(2) of this Section shall collect and record the following information for each cleaning solution used:

A) The name and identification of each cleaning solution;

B) Date, time of preparation, and each subsequent modification of the batch;

C) The molecular weight, density, and VOM composite partial vapor pressure of each cleaning solvent, as determined in accordance
with the applicable methods and procedures specified in Section 218.110 of this Part;

D) The total amount of each cleaning solvent used to prepare the as-used cleaning solution; and

E) The VOM composite partial vapor pressure of each as-used cleaning solution, as determined in accordance with the applicable methods and procedures specified in Section 218.110 of this Part;

5) All sources complying with this Section pursuant to the requirements of subsection (b)(3) of this Section shall comply with the following:

A) By April 1, 2011, or upon initial start-up of the source, whichever is later, and upon initial start-up of a new emissions control system, include in the certification required by subsection (e)(3) of this Section a declaration that the monitoring equipment required under Section 218.187(f) of this Subpart has been properly installed and calibrated according to manufacturer's specifications;

B) If testing of an emissions control system is conducted pursuant to Section 218.187(g) of this Subpart, the owner or operator shall, within 90 days after conducting such testing, submit a copy of all test results to the Agency and shall submit a certification to the Agency that includes the following:

i) A declaration that all tests and calculations necessary to demonstrate compliance with Section 218.187(b)(3) of this Subpart have been properly performed;

ii) A statement whether the subject cleaning operation is or is not in compliance with Section 218.187(b)(3) of this Subpart; and

iii) The operating parameters of the emissions control system during testing, as monitored in accordance with Section 218.187(f) of this Subpart;
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C) Collect and record daily the following information for each cleaning operation subject to the requirements of Section 218.187(b)(3) of this Subpart:

i) Emissions control system monitoring data in accordance with Section 218.187(f) of this Subpart, as applicable;

ii) A log of operating time for the emissions control system, monitoring equipment, and associated cleaning equipment;

iii) A maintenance log for the emissions control system and monitoring equipment detailing all routine and non-routine maintenance performed, including dates and duration of any outages;

D) Maintain records documenting the use of good operating practices consistent with the equipment manufacturer’s specifications for the cleaning equipment being used and the emissions control system equipment. At a minimum, these records shall include:

i) Records for periodic inspection of the cleaning equipment and emissions control system equipment with date of inspection, individual performing the inspection, and nature of inspection;

ii) Records for repair of malfunctions and breakdowns with identification and description of incident, date identified, date repaired, nature of repair, and the amount of VOM released into the atmosphere as a result of the incident;

6) All sources subject to the requirements of subsections (b) and (d) of this Section shall notify the Agency of any violation of subsection (b) or (d) by providing a description of the violation and copies of records documenting the violation to the Agency within 30 days following the occurrence of the violation;

7) All records required by this subsection (e) shall be retained by the source for at least three years and shall be made available to the Agency upon request.
f) Monitoring Requirements.

1) If an afterburner or carbon adsorber is used to demonstrate compliance, the owner or operator of a source subject to Section 218.187(b)(3) of this Subpart shall:

A) Install, calibrate, operate, and maintain temperature monitoring devices with an accuracy of 3°C or 5°F on the emissions control system in accordance with Section 218.105(d)(2) of this Part and in accordance with the manufacturer's specifications. Monitoring shall be performed at all times when the emissions control system is operating; and

B) Install, calibrate, operate and maintain, in accordance with manufacturer's specifications, a continuous recorder on the temperature monitoring devices, such as a strip chart, recorder or computer, with at least the same accuracy as the temperature monitor;

2) If an emissions control system other than an afterburner or carbon adsorber is used to demonstrate compliance, the owner or operator of a source subject to Section 218.187(b)(3) of this Subpart shall install, maintain, calibrate, and operate such monitoring equipment as set forth in the owner's or operator's plan approved by the Agency and USEPA pursuant to Section 218.187(b)(3).

g) Testing Requirements.

1) Testing to demonstrate compliance with the requirements of this Section shall be conducted by the owner or operator within 90 days after a request by the Agency, or as otherwise specified in this Section. Such testing shall be conducted at the expense of the owner or operator and the owner or operator shall notify the Agency in writing 30 days in advance of conducting the testing to allow the Agency to be present during the testing;
2) Testing to demonstrate compliance with the VOM content limitations in Section 218.187(b)(1) of this Subpart, and to determine the VOM content of cleaning solvents and cleaning solutions, shall be conducted as follows:

   A) The applicable test methods and procedures specified in Section 218.105(a) of this Part shall be used; provided, however, Method 24, incorporated by reference in Section 218.112 of this Part, shall be used to demonstrate compliance; or

   B) The manufacturer's specifications for VOM content for cleaning solvents may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 218.105(a) of this Part; provided, however, Method 24 shall be used to determine compliance;

3) Testing to determine the VOM composite partial vapor pressure of cleaning solvents, cleaning solvent concentrates, and as-used cleaning solutions shall be conducted in accordance with the applicable methods and procedures specified in Section 218.110 of this Part;

4) For afterburners and carbon adsorbers, the methods and procedures of Section 218.105(d) through (f) shall be used for testing to demonstrate compliance with the requirements of Section 218.187(b)(3) of this Subpart, as follows:

   A) To select the sampling sites, Method 1 or 1A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 218.112 of this Part;

   B) To determine the volumetric flow rate of the exhaust stream, Method 2, 2A, 2C, or 2D, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 218.112 of this Part;

   C) To determine the VOM concentration of the exhaust stream entering and exiting the emissions control system, Method 25 or 25A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 218.112 of this Part. For thermal and catalytic
afterburners, Method 25 must be used except under the following circumstances, in which case Method 25A must be used:

i) The allowable outlet concentration of VOM from the emissions control system is less than 50 ppmv, as carbon;

ii) The VOM concentration at the inlet of the emissions control system and the required level of control result in exhaust concentrations of VOM of 50 ppmv, or less, as carbon; and

iii) Due to the high efficiency of the emissions control system, the anticipated VOM concentration at the emissions control system exhaust is 50 ppmv or less, as carbon, regardless of inlet concentration. If the source elects to use Method 25A under this option, the exhaust VOM concentration must be 50 ppmv or less, as carbon, and the required destruction efficiency must be met for the source to have demonstrated compliance. If the Method 25A test results show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, a retest is required. The retest shall be conducted using either Method 25 or Method 25A. If the retest is conducted using Method 25A and the test results again show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, the source must retest using Method 25;

D) During testing, the cleaning equipment shall be operated at representative operating conditions and flow rates;

5) An owner or operator using an emissions control system other than an afterburner or carbon adsorber shall conduct testing to demonstrate compliance with the requirements of Section 218.187(b)(3) of this Subpart as set forth in the owner's or operator's plan approved by the Agency and USEPA as federally enforceable permit conditions pursuant to Section 218.187(b)(3) of this Subpart.

(Source: Added at 34 Ill. Reg. ______, effective ___________)
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SUBPART F: COATING OPERATIONS

Section 218.204 Emission Limitations

Except as provided in Sections 218.205, 218.207, 218.208, 218.212, 218.215 and 218.216 of this Subpart, no owner or operator of a coating line shall apply at any time any coating in which the VOM content exceeds the following emission limitations for the specified coating. Except as provided in Sections 218.204(l) and 218.204(p), compliance with the emission limitations marked with an asterisk in this Section is required on and after March 15, 1996, and compliance with emission limitations not marked with an asterisk is required until March 15, 1996. The following emission limitations are expressed in units of VOM per volume of coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied at each coating applicator, except where noted. Compounds which are specifically exempted from the definition of VOM should be treated as water for the purpose of calculating the "less water" part of the coating composition. Compliance with this Subpart must be demonstrated through the applicable coating analysis test methods and procedures specified in Section 218.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 218.211(c) of this Subpart except where noted. (Note: The equation presented in Section 218.206 of this Part shall be used to calculate emission limitations for determining compliance by add-on controls, credits for transfer efficiency, emissions trades and cross-line averaging.) The emission limitations are as follows:

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<tr>
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<th>Automobile or Light-Duty Truck Coating</th>
<th>kg/l</th>
<th>lb/gal</th>
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<tbody>
<tr>
<td>1)</td>
<td>Prime coat</td>
<td>0.14</td>
<td>(1.2)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.14*</td>
<td>(1.2)*</td>
</tr>
<tr>
<td>2)</td>
<td>Primer surface coat</td>
<td>1.81</td>
<td>(15.1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.81*</td>
<td>(15.1)*</td>
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(Note: The primer surface coat limitation is in units of kg (lbs) of VOM per 1 (gal) of coating solids deposited. Compliance with the limitation shall be based on the daily-weighted average from an entire primer surfacer operation. Compliance shall be demonstrated in accordance with the topcoat protocol referenced in Section 218.105(b) and the recordkeeping and reporting requirements specified in Section 218.211(f). Testing to demonstrate compliance shall be performed in accordance with the topcoat protocol and a detailed testing proposal approved by the...
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Agency and USEPA specifying the method of demonstrating compliance with the protocol. Section 218.205 does not apply to the primer surfacer limitation.)

3) **Topcoat**

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<tr>
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<th>kg/l</th>
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<tr>
<td>Topcoat</td>
<td>1.81</td>
<td>(15.1)</td>
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<td></td>
<td>1.81*</td>
<td>(15.1)*</td>
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(Note: The topcoat limitation is in units of kg (lbs) of VOM per 1 (gal) of coating solids deposited. Compliance with the limitation shall be based on the daily-weighted average from an entire topcoat operation. Compliance shall be demonstrated in accordance with the topcoat protocol referenced in Section 218.105(b) of this Part and the recordkeeping and reporting requirements specified in Section 218.211(f). Testing to demonstrate compliance shall be performed in accordance with the topcoat protocol and a detailed testing proposal approved by the Agency and USEPA specifying the method of demonstrating compliance with the protocol. Section 218.205 of this Part does not apply to the topcoat limitation.)

4) **Final repair coat**

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<td>Final repair coat</td>
<td>0.58</td>
<td>(4.8)</td>
</tr>
<tr>
<td></td>
<td>0.58*</td>
<td>(4.8)*</td>
</tr>
</tbody>
</table>

b) **Can Coating**

1) **Sheet basecoat and overvarnish**

A) **Sheet basecoat**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.34</td>
<td>(2.8)</td>
</tr>
<tr>
<td></td>
<td>0.26*</td>
<td>(2.2)*</td>
</tr>
</tbody>
</table>

B) **Overvarnish**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.34</td>
<td>(2.8)</td>
</tr>
<tr>
<td></td>
<td>0.34</td>
<td>(2.8)*</td>
</tr>
</tbody>
</table>

2) **Exterior basecoat and overvarnish**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.34</td>
<td>(2.8)</td>
</tr>
<tr>
<td></td>
<td>0.25*</td>
<td>(2.1)*</td>
</tr>
</tbody>
</table>

3) **Interior body spray coat**

A) **Two piece**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.51</td>
<td>(4.2)</td>
</tr>
<tr>
<td></td>
<td>0.44*</td>
<td>(3.7)*</td>
</tr>
</tbody>
</table>
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>B)</td>
<td>0.51</td>
<td>(4.2)</td>
</tr>
<tr>
<td></td>
<td>0.51*</td>
<td>(4.2)*</td>
</tr>
<tr>
<td>4)</td>
<td>0.51</td>
<td>(4.2)</td>
</tr>
<tr>
<td></td>
<td>0.51*</td>
<td>(4.2)*</td>
</tr>
<tr>
<td>5)</td>
<td>0.66</td>
<td>(5.5)</td>
</tr>
<tr>
<td></td>
<td>0.66*</td>
<td>(5.5)*</td>
</tr>
<tr>
<td>6)</td>
<td>0.44</td>
<td>(3.7)</td>
</tr>
<tr>
<td></td>
<td>0.44*</td>
<td>(3.7)*</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>c)</td>
<td>0.35</td>
<td>(2.9)</td>
</tr>
<tr>
<td></td>
<td>0.28*</td>
<td>(2.3)*</td>
</tr>
</tbody>
</table>

(Note: The paper coating limitation shall not apply to any owner or operator of any paper coating line on which flexographic, rotogravure, lithographic, or letterpress printing is performed if the paper coating line complies with the applicable emissions limitations in Subpart HSection 218.401 of this Part. In addition, screen printing on paper is not regulated as paper coating, but is regulated under Subpart TT of this Part.)

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>d)</td>
<td>0.31</td>
<td>(2.6)</td>
</tr>
<tr>
<td></td>
<td>0.20*</td>
<td>(1.7)*</td>
</tr>
<tr>
<td>e)</td>
<td>0.35</td>
<td>(2.9)</td>
</tr>
<tr>
<td></td>
<td>0.28*</td>
<td>(2.3)*</td>
</tr>
<tr>
<td>f)</td>
<td>0.45</td>
<td>(3.8)</td>
</tr>
<tr>
<td></td>
<td>0.28*</td>
<td>(2.3)*</td>
</tr>
<tr>
<td>g)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1)</td>
<td>0.36</td>
<td>(3.0)</td>
</tr>
<tr>
<td></td>
<td>0.34*</td>
<td>(2.8)*</td>
</tr>
</tbody>
</table>
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

2) Baked
   h) Large Appliance Coating

1) Air dried
   0.34 (2.8)
   0.34* (2.8)*

2) Baked
   0.34 (2.8)
   0.28* (2.3)*

BOARD NOTE: The limitation shall not apply to the use of quick-drying lacquers for repair of scratches and nicks that occur during assembly, provided that the volume of coating does not exceed 0.95 l (1 quart) in any one rolling eight-hour period.

i) Magnet Wire Coating
   kg/lb/gal
   0.20 (1.7)
   0.20* (1.7)*

j) Miscellaneous Metal Parts and Products Coating

1) Clear coating
   0.52 (4.3)
   0.52* (4.3)*

2) Extreme performance coating
   A) Air dried
      0.42 (3.5)
      0.42* (3.5)*

   B) Baked
      0.42 (3.5)
      0.40* (3.3)*

3) Steel pail and drum interior coating
   0.52 (4.3)
   0.52* (4.3)*

4) All other coatings
   A) Air Dried
      0.42 (3.5)
      0.40* (3.3)*
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

B) Baked 0.36 (3.0) 0.34* (2.8)*

5) Marine engine coating

A) Air Dried 0.42 (3.5) 0.42* (3.5)*

B) Baked

i) Primer/Topcoat 0.42 (3.5) 0.42* (3.5)*

ii) Corrosion resistant basecoat 0.42 (3.5) 0.28* (2.3)*

C) Clear Coating 0.52 (4.3) 0.52* (4.3)*

6) Metallic Coating

A) Air Dried 0.42 (3.5) 0.42* (3.5)*

B) Baked 0.36 (3.0) 0.36 (3.0)*

7) Definitions

A) For purposes of subsection 218.204(j)(5) of this Section, the following terms are defined:

i) "Corrosion resistant basecoat" means, for purposes of subsection 218.204(j)(5)(B)(ii) of this Section, a waterborne epoxy coating applied via an electrodeposition process to a metal surface prior to spray coating, for the purpose of enhancing corrosion resistance.

ii) "Electrodeposition process" means, for purposes of
subsection 218.204(j)(5) of this Section, a water-borne dip coating process in which opposite electrical charges are applied to the substrate and the coating. The coating is attracted to the substrate due to the electrochemical potential difference that is created.

iii) "Marine engine coating" means, for purposes of subsection 218.204(j)(5) of this Section, any extreme performance protective, decorative or functional coating applied to an engine that is used to propel watercraft.

B) For purposes of subsection 218.204(j)(6) of this Section, "metallic coating" means a coating which contains more than ¼ lb/gal of metal particles, as applied.

<table>
<thead>
<tr>
<th>k)</th>
<th>Heavy Off-Highway Vehicle Products Coating</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td>Extreme performance prime coat</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>2)</td>
<td>Extreme performance topcoat (air dried)</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>3)</td>
<td>Final repair coat (air dried)</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>4)</td>
<td>All other coatings are subject to the emission limitations for miscellaneous metal parts and products coatings in subsection (j) above.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>l)</th>
<th>Wood Furniture Coating</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td>Limitations before March 15, 1998:</td>
</tr>
<tr>
<td></td>
<td>A) Clear topcoat</td>
</tr>
<tr>
<td></td>
<td>B) Opaque stain</td>
</tr>
<tr>
<td></td>
<td>C) Pigmented coat</td>
</tr>
</tbody>
</table>
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

D) Repair coat 0.67  (5.6)
E) Sealer 0.67  (5.6)
F) Semi-transparent stain 0.79  (6.6)
G) Wash coat 0.73  (6.1)

(Note: Prior to March 15, 1998, an owner or operator of a wood furniture coating operation subject to this Section shall apply all coatings, with the exception of no more than 37.8 l (10 gal) of coating per day used for touch-up and repair operations, using one or more of the following application systems: airless spray application system, air-assisted airless spray application system, electrostatic spray application system, electrostatic bell or disc spray application system, heated airless spray application system, roller coating, brush or wipe coating application system, dip coating application system or high volume low pressure (HVLP) application system.)

2) On and after March 15, 1998, wood furniture sealers and topcoats must comply with one of the limitations specified in subsections (l)(2)(A) through (E), below:

<table>
<thead>
<tr>
<th></th>
<th>kg VOM/</th>
<th>lb VOM/</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>kg solids</td>
<td>lb solids</td>
</tr>
<tr>
<td>A) Topcoat</td>
<td>0.8</td>
<td>(0.8)</td>
</tr>
<tr>
<td>B) Sealers and topcoats with the following limits:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Sealer other than acid-cured alkyd amino vinyl sealer</td>
<td>1.9</td>
<td>(1.9)</td>
</tr>
<tr>
<td>ii) Topcoat other than acid-cured alkyd amino conversion varnish topcoat</td>
<td>1.8</td>
<td>(1.8)</td>
</tr>
<tr>
<td>iii) Acid-cured alkyd amino</td>
<td>2.3</td>
<td>(2.3)</td>
</tr>
</tbody>
</table>
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

vinyl sealer

iv) Acid-cured alkyd amino conversion varnish topcoat 2.0 (2.0)

C) Meet the provisions of Section 218.215 of this Subpart for use of an averaging approach;

D) Achieve a reduction in emissions equivalent to the requirements of subsection (l)(2)(A) or (B) of this Section, as calculated using Section 218.216 of this Subpart; or

E) Use a combination of the methods specified in subsections (l)(2)(A) through (D) of this Section.

3) Other wood furniture coating limitations on and after March 15, 1998:

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Opaque stain</td>
<td>0.56</td>
<td>(4.7)</td>
</tr>
<tr>
<td>B) Non-topcoat pigmented coat</td>
<td>0.60</td>
<td>(5.0)</td>
</tr>
<tr>
<td>C) Repair coat</td>
<td>0.67</td>
<td>(5.6)</td>
</tr>
<tr>
<td>D) Semi-transparent stain</td>
<td>0.79</td>
<td>(6.6)</td>
</tr>
<tr>
<td>E) Wash coat</td>
<td>0.73</td>
<td>(6.1)</td>
</tr>
</tbody>
</table>

4) Other wood furniture coating requirements on and after March 15, 1998:

A) No source subject to the limitations of subsection (l)(2) or (3) of this Section and utilizing one or more wood furniture coating spray booths shall use strippable spray booth coatings containing more than 0.8 kg VOM/kg solids (0.8 lb VOM/lb solids), as applied.

B) Any source subject to the limitations of subsection (l)(2) or (3) of this Section shall comply with the requirements of Section 218.217 of this Subpart.
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

C) Any source subject to the limitations of subsection (l)(2)(A) or (B) of this Section and utilizing one or more continuous coaters shall, for each continuous coater, use an initial coating which complies with the limitations of subsection (l)(2)(A) or (B) of this Section. The viscosity of the coating in each reservoir shall always be greater than or equal to the viscosity of the initial coating in the reservoir. The owner or operator shall:

i) Monitor the viscosity of the coating in the reservoir with a viscosity meter or by testing the viscosity of the initial coating and retesting the coating in the reservoir each time solvent is added;

ii) Collect and record the reservoir viscosity and the amount and weight of VOM per weight of solids of coating and solvent each time coating or solvent is added; and

iii) Maintain these records at the source for a period of three years.

m) Existing Diesel-Electric Locomotive Coating Lines in Cook County

<table>
<thead>
<tr>
<th></th>
<th>Existing Diesel-Electric Locomotive Coating Lines in Cook County</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td>Extreme performance prime coat</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>2)</td>
<td>Extreme performance top-coat (air dried)</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>3)</td>
<td>Final repair coat (air dried)</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>4)</td>
<td>High-temperature aluminum coating</td>
<td>0.72</td>
<td>(6.0)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.72*</td>
<td>(6.0)*</td>
</tr>
<tr>
<td>5)</td>
<td>All other coatings</td>
<td>0.36</td>
<td>(3.0)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.36*</td>
<td>(3.0)*</td>
</tr>
<tr>
<td>n)</td>
<td>Plastic Parts Coating: Automotive/Transportation</td>
<td>kg/l</td>
<td>lb/gal</td>
</tr>
<tr>
<td>----</td>
<td>-------------------------------------------------</td>
<td>------</td>
<td>--------</td>
</tr>
<tr>
<td>1) Interiors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A) Baked</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Color coat</td>
<td>0.49*</td>
<td>(4.1)*</td>
<td></td>
</tr>
<tr>
<td>ii) Primer</td>
<td>0.46*</td>
<td>(3.8)*</td>
<td></td>
</tr>
<tr>
<td>B) Air Dried</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Color coat</td>
<td>0.38*</td>
<td>(3.2)*</td>
<td></td>
</tr>
<tr>
<td>ii) Primer</td>
<td>0.42*</td>
<td>(3.5)*</td>
<td></td>
</tr>
<tr>
<td>2) Exteriors (flexible and non-flexible)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A) Baked</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Primer</td>
<td>0.60*</td>
<td>(5.0)*</td>
<td></td>
</tr>
<tr>
<td>ii) Primer non-flexible</td>
<td>0.54*</td>
<td>(4.5)*</td>
<td></td>
</tr>
<tr>
<td>iii) Clear coat</td>
<td>0.52*</td>
<td>(4.3)*</td>
<td></td>
</tr>
<tr>
<td>iv) Color coat</td>
<td>0.55*</td>
<td>(4.6)*</td>
<td></td>
</tr>
<tr>
<td>B) Air Dried</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Primer</td>
<td>0.66*</td>
<td>(5.5)*</td>
<td></td>
</tr>
<tr>
<td>ii) Clear coat</td>
<td>0.54*</td>
<td>(4.5)*</td>
<td></td>
</tr>
<tr>
<td>iii) Color coat (red &amp; black)</td>
<td>0.67*</td>
<td>(5.6)*</td>
<td></td>
</tr>
<tr>
<td>iv) Color coat (others)</td>
<td>0.61*</td>
<td>(5.1)*</td>
<td></td>
</tr>
<tr>
<td>3) Specialty</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

A) Vacuum metallizing basecoats, texture base coats 0.66* (5.5)*
B) Black coatings, reflective argent coatings, air bag cover coatings, and soft coatings 0.71* (5.9)*
C) Gloss reducers, vacuum metallizing topcoats, and texture topcoats 0.77* (6.4)*
D) Stencil coatings, adhesion primers, ink pad coatings, electrostatic prep coatings, and resist coatings 0.82* (6.8)*
E) Headlamp lens coatings 0.89* (7.4)*

o) Plastic Parts Coating: Business Machine kg/l lb/gal
   1) Primer 0.14* (1.2)*
   2) Color coat (non-texture coat) 0.28* (2.3)*
   3) Color coat (texture coat) 0.28* (2.3)*
   4) Electromagnetic interference/radio frequency interference (EMI/RFI) shielding coatings 0.48* (4.0)*
   5) Specialty Coatings
      A) Soft coat 0.52* (4.3)*
      B) Plating resist 0.71* (5.9)*
      C) Plating sensitizer 0.85* (7.1)*

p) Flat Wood Paneling Coatings. On and after May 1, 2010, flat wood paneling coatings shall comply with one of the following limitations:
1) 0.25 kg VOM/1 of coatings (2.1 lb VOM/gal coatings); or
2) 0.35 kg VOM/1 solids (2.9 lb VOM/gal solids).

(Source: Amended at 34 Ill. Reg. _____, effective ____________)

Section 218.205 Daily-Weighted Average Limitations

No owner or operator of a coating line subject to the limitations of Section 218.204 of this Subpart and complying by means of this Section shall operate the subject coating line unless the owner or operator has demonstrated compliance with subsection (a), (b), (c), (d), (e), (f), (g), (h) or (i) of this Section (depending upon the category of coating) through the applicable coating analysis test methods and procedures specified in Section 218.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 218.211(d) of this Subpart:

a) No owner or operator of a coating line subject to only one of the limitations from among Section 218.204(a)(1), (a)(4), (c), (d), (e), (f), (i), or (p) of this Subpart shall apply coatings on any such coating line, during any day, whose daily-weighted average VOM content exceeds the emission limitation to which the coatings are subject.

b) No owner or operator of a miscellaneous metal parts and products coating line subject to the limitations of Section 218.204(j) of this Subpart shall apply coatings to miscellaneous metal parts or products on the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 218.204(j) during the same day (e.g., all coatings used on the line are subject to 0.42 kg/l [3.5 lbs/gal]), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 218.204(j) of this Subpart, during the same day, the owner or operator shall have a site-specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS


c) No owner or operator of a can coating line subject to the limitations of Section 218.204(b) of this Subpart shall operate the subject coating line using a coating with a VOM content in excess of the limitations specified in Section 218.204(b) of this Subpart unless all of the following requirements are met:

1) An alternative daily emission limitation shall be determined for the can coating operation, i.e., for all of the can coating lines at the source, according to subsection (c)(2) of this Section. Actual daily emissions shall never exceed the alternative daily emission limitation and shall be calculated by use of the following equation.

\[ E_d = \sum_{i=1}^{n} V_i C_i \]

where:

- \( E_d \) = Actual VOM emissions for the day in units of kg/day (lbs/day);
- \( i \) = Subscript denoting a specific coating applied;
- \( n \) = Total number of coatings applied in the can coating operation, i.e. all can coating lines at the source;
- \( V_i \) = Volume of each coating applied for the day in units of l/day (gal/day) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);
- \( C_i \) = The VOM content of each coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM).

2) The alternative daily emission limitation (\( A_d \)) shall be determined for the can coating operation, i.e., for all of the can coating lines at the source, on a daily basis as follows:
POLLUTION CONTROL BOARD

NOTICE OF PROPOSED AMENDMENTS

\[ A_d = \sum_{i=1}^{n} V_i L_i \left( \frac{D_i - C_i}{D_i - L_i} \right) \]

where:

- \( A_d \) = The VOM emissions allowed for the day in units of kg/day (lbs/day);
- \( i \) = Subscript denoting a specific coating applied;
- \( n \) = Total number of surface coatings applied in the can coating operation;
- \( C_i \) = The VOM content of each surface coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);
- \( D_i \) = The density of VOM in each coating applied. For the purposes of calculating \( A_d \), the density is 0.882 kg VOM/l VOM (7.36 lbs VOM/gal VOM);
- \( V_i \) = Volume of each surface coating applied for the day in units of l (gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);
- \( L_i \) = The VOM emission limitation for each surface coating applied as specified in Section 218.204(b) of this Subpart in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM).

\( d) \) No owner or operator of a heavy off-highway vehicle products coating line subject to the limitations of Section 218.204(k) of this Subpart shall apply coatings to heavy off-highway vehicle products on the subject coating line unless the requirements of subsection (d)(1) or (d)(2) of this Section are met.

1) For each coating line which applies multiple coatings, all of which are
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subject to the same numerical emission limitation within Section 218.204(k) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.42 kg/l (3.5 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 218.204(k) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) 51 Fed. Reg. 43814 (December 4, 1986), must be satisfied.

e) No owner or operator of a wood furniture coating line subject to the limitations of Section 218.204(l)(1) or (l)(3) of this Subpart shall apply coatings to wood furniture on the subject coating line unless the requirements of subsection (e)(1) or subsection (e)(2) of this Section, in addition to the requirements specified in the note to Section 218.204(l)(1) of this Subpart, are met.

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 218.204(l)(1) or (l)(3) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.67 kg/l (5.6 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 218.204(l)(1) or (l)(3) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) 51 Fed. Reg. 43814 (December 4, 1986), must be satisfied.

f) No owner or operator of an existing diesel-electric locomotive coating line in Cook County, subject to the limitations of Section 218.204(m) of this Subpart shall apply coatings to diesel-electric locomotives on the subject coating line unless the requirements of subsection (f)(1) or (f)(2) of this Section are met.
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1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 218.204(m) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.42 kg/l (3.5 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 218.204(m) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA’s Emissions Trading Policy Statement (and related policy) must be satisfied.

g) No owner or operator of a plastic parts coating line, subject to the limitations of Section 218.204(n) or (o) of this Subpart shall apply coatings to business machine or automotive/transportation plastic parts on the subject coating line unless the requirements of subsection (g)(1) or (g)(2) of this Section are met:

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 218.204(n) or (o) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.42 kg/l (3.5 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used; or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 218.204(n) or (o) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA’s Emissions Trading Policy Statement (and related policy) must be satisfied.

h) No owner or operator of a metal furniture coating line, subject to the limitations of Section 218.204(g) of this Subpart shall apply coatings on the subject coating line unless the requirements of subsection (h)(1) or (h)(2) of this Section are met:

1) For each coating line which applies multiple coatings, all of which are
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subject to the same numerical emission limitation within Section 218.204(g) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.34 kg/l (2.8 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used; or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 218.204(g) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) must be satisfied.

i) No owner or operator of a large appliance coating line, subject to the limitations of Section 218.204(h) of this Subpart shall apply coatings on the subject coating line unless the requirements of subsection (i)(1) or (i)(2) of this Section are met:

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 218.204(h) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.34 kg/l (2.8 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 218.204(h) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) must be satisfied.

(Source: Amended at 34 Ill. Reg. ______, effective __________)

Section 218.207 Alternative Emission Limitations

a) Any owner or operator of a coating line subject to Section 218.204 of this Subpart may comply with this Section, rather than with Section 218.204 of this Subpart, if a capture system and control device are operated at all times the coating line is in operation and the owner or operator demonstrates compliance with subsections
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(c), (d), (e), (f), (g), (h), (i), (j), or (k) or (l) of this Section (depending upon the source category) through the applicable coating analysis and capture system and control device efficiency test methods and procedures specified in Section 218.105 of this Part and the recordkeeping and reporting requirements specified in Section 218.211(e) of this Subpart; and the control device is equipped with the applicable monitoring equipment specified in Section 218.105(d) of this Part and the monitoring equipment is installed, calibrated, operated and maintained according to vendor specifications at all times the control device is in use. A capture system and control device, which does not demonstrate compliance with subsection (c), (d), (e), (f), (g), (h), (i), (j), or (k) or (l) of this Section may be used as an alternative to compliance with Section 218.204 of this Subpart only if the alternative is approved by the Agency and approved by the USEPA as a SIP revision.

b) Alternative Add-On Control Methodologies

1) The coating line is equipped with a capture system and control device that provides 81 percent reduction in the overall emissions of VOM from the coating line and the control device has a 90 percent efficiency, or

2) The system used to control VOM from the coating line is demonstrated to have an overall efficiency sufficient to limit VOM emissions to no more than what is allowed under Section 218.204 of this Subpart. Use of any control system other than an afterburner, carbon adsorption, condensation, or absorption scrubber system can be allowed only if approved by the Agency and approved by the USEPA as a SIP revision. The use of transfer efficiency credits can be allowed only if approved by the Agency and approved by the USEPA as a SIP revision. Baseline transfer efficiencies and transfer efficiency test methods must be approved by the Agency and the USEPA. Such overall efficiency is to be determined as follows:

A) Obtain the emission limitation from the appropriate subsection in Section 218.204 of this Subpart;

B) Calculate "S" according to the equation in Section 218.206 of this Subpart;

C) Calculate the overall efficiency required according to Section 218.105(e) of this Part. For the purposes of calculating this value,
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according to the equation in Section 218.105(e)(2) of this Part, VOM\textsubscript{i} is equal to the value of "S" as determined above in subsection (b)(2)(B) of this Section.

c) No owner or operator of a coating line subject to only one of the emission limitations from among Section 218.204(a)(1), (a)(4), (c), (d), (e), (f), or (i) of this Subpart and equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met. No owner or operator of a coating line subject to Section 218.204(a)(2) or 218.204(a)(3) and equipped with a capture system and control device shall operate the coating line unless the owner or operator demonstrates compliance with such limitation in accordance with the topcoat protocol referenced in Section 218.105(b).

d) No owner or operator of a miscellaneous metal parts and products coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 218.204(j) of this Subpart (e.g., all coatings used on the line are subject to 0.42 kg/1 [3.5 lbs/gal], and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

e) No owner or operator of a heavy off-highway vehicle products coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 218.204(k) of this Subpart (e.g., all coatings used on the line are subject to 0.42 kg/1 [3.5 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

f) No owner or operator of an existing diesel-electric locomotive coating line in Cook County which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 218.204(m) of this Subpart (e.g., all coatings used on the line are subject to 0.42 kg/1 [3.5 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

g) No owner or operator of a wood furniture coating line which applies one or more
coatings during the same day, all of which are subject to the same numerical emission limitation within Section 218.204(l) of this Subpart (e.g., all coatings used on the line are subject to 0.67 kg/l [5.6 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met. If compliance is achieved by meeting the requirements in subsection (b)(2) of this Section, then the provisions in the note to Section 218.204(l) of this Subpart must also be met.

h) No owner or operator of a can coating line which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (h)(1) or (h)(2) of this Section are met.

1) An alternative daily emission limitation shall be determined for the can coating operation, i.e. for all of the can coating lines at the source, according to Section 218.205(c)(2) of this Subpart. Actual daily emissions shall never exceed the alternative daily emission limitation and shall be calculated by use of the following equation:

\[ E_d = \sum_{i=1}^{n} V_i C_i (1 - F_i) \]

where:

\[ E_d \] = Actual VOM emissions for the day in units of kg/day (lbs/day);

\[ i \] = Subscript denoting a specific coating applied;

\[ n \] = Total number of surface coatings as applied in the can coating operation;

\[ V_i \] = Volume of each coating as applied for the day in units of l/day (gal/day) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);
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\[ C_i = \text{The VOM content of each coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM) and} \]

\[ F_i = \text{Fraction, by weight, of VOM emissions from the surface coating reduced or prevented from being emitted to the ambient air. This is the overall efficiency of the capture system and control device.} \]

2) The coating line is equipped with a capture system and control device that provide 75 percent reduction in the overall emissions of VOM from the coating line and the control device has a 90 percent efficiency.

i) No owner or operator of a plastic parts coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 218.204(n) or (o) of this Subpart (e.g., all coatings used on the line are subject to 0.42 kg/l [3.5 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

j) No owner or operator of a metal furniture coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 218.204(g) of this Subpart (e.g., all coatings used on the line are subject to 0.34 kg/l [2.8 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

k) No owner or operator of a large appliance coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 218.204(h) of this Subpart (e.g., all coatings used on the line are subject to 0.34 kg/l [2.8 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

l) No owner or operator of a flat wood paneling coating line that is equipped with a capture system and control device shall operate the subject coating line unless either:
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1) The capture system and control device provide at least 90 percent reduction in the overall emissions of VOM from the coating line; or

2) The owner or operator of the flat wood paneling coating line complies with all requirements set forth in subsection (b)(2) of this Section.

(Source: Amended at 34 Ill. Reg. ______, effective __________)

Section 218.210 Compliance Schedule

Every owner or operator of a coating line (of a type included within Section 218.204 of this Subpart) shall comply with the requirements of Section 218.204, 218.205, 218.207 or 218.208 and Section 218.211 or Sections 218.212 and 218.213 of this Subpart in accordance with the appropriate compliance schedule as specified in subsection (a), (b), (c), (d), (e), or (f), or (g) below:

a) No owner or operator of a coating line which is exempt from the limitations of Section 218.204 of this Subpart because of the criteria in Section 218.208(a) or (b) of this Subpart shall operate said coating line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 218.211(b) of this Subpart.

b) No owner or operator of a coating line complying by means of Section 218.204 of this Subpart shall operate said coating line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Sections 218.204 and 218.211(c) of this Subpart.

c) No owner or operator of a coating line complying by means of Section 218.205 of this Subpart shall operate said coating line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Sections 218.205 and 218.211(d) of this Subpart.

d) No owner or operator of a coating line complying by means of Section 218.207 of this Subpart shall operate said coating line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Sections 218.207 and 218.211(e) of this Subpart.

e) No owner or operator of a coating line subject to one or more of the emission limitations contained in Section 218.204 of this Subpart on or after March 15,
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1996, choosing to comply by means of Section 218.204, 218.205 or 218.207 of this Subpart, shall operate said coating line on or after March 15, 1996, unless the owner or operator complies with and continues to comply with, respectively, the applicable requirements in Section 218.204, or the alternative control options in Section 218.205 or 218.207 and the requirements of Section 218.211.

f) No owner or operator of a coating line subject to one or more of the emission limitations contained in Section 218.204 of this Subpart on or after March 15, 1996, choosing to comply by means of Section 218.212 of this Subpart, shall operate said coating line on or after March 15, 1996, unless the owner or operator complies with and continues to comply with the requirements of Sections 218.212 and 218.213 of this Subpart.

g) No owner or operator of a coating line subject to the emission limitations contained in Section 218.204(p) of this Subpart shall operate that coating line on or after a date consistent with Section 218.106(e) of this Part, unless the owner or operator has complied with, and continues to comply with, Section 218.204(p) or the alternative control options in Section 218.205 or 218.207, and the requirements of Sections 218.211 and 218.217 of this Subpart, as applicable.

(Source: Amended at 34 Ill. Reg. ______, effective __________)

Section 218.211 Recordkeeping and Reporting

a) The VOM content of each coating and the efficiency of each capture system and control device shall be determined by the applicable test methods and procedures specified in Section 218.105 of this Part to establish the records required under this Section.

b) Any owner or operator of a coating line which is exempted from the limitations of Section 218.204 of this Subpart because of Section 218.208(a) or (b) of this Subpart shall comply with the following:

1) For sources exempt under Section 218.208(a) of this Subpart, by a date consistent with Section 218.106 of this Part, the owner or operator of a coating line or a group of coating lines referenced in subsection (b) of this Section shall certify to the Agency that the coating line or group of coating lines is exempt under the provisions of Section 218.208(a) of this Subpart. Such certification shall include:
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A) A declaration that the coating line or group of coating lines is exempt from the limitations of Section 218.204 of this Subpart because of Section 218.208(a) of this Subpart; and

B) Calculations which demonstrate that the combined VOM emissions from the coating lines or group of coating lines never exceed 6.8 kg (15 lbs) per day before the application of capture systems and control devices. The following equation shall be used to calculate total VOM emissions:

\[ T_e = \sum_{i=1}^{m} \sum_{j=1}^{n} \left( A_i B_i \right)_j \]

where:

- \( T_e \) = Total VOM emissions from coating lines each day before the application of capture systems and control devices in units of kg/day (lbs/day);
- \( m \) = Number of coating lines at the source that otherwise would be subject to the same subsection of Section 218.104 of this Part (because they belong to the same category, e.g., can coating);
- \( j \) = Subscript denoting an individual coating line;
- \( n \) = Total number of coatings as applied each day on each coating line;
- \( i \) = Subscript denoting an individual coating;
- \( V_i \) = Weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line in units of kg VOM/l (lbs VOM/gal); and
- \( B_i \) = Volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line in units of l/day (gal/day). The instrument or method...
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by which the owner or operator accurately measured or calculated the volume of each coating as applied on each coating line each day shall be described in the certification to the Agency.

2) For sources exempt under Section 218.208(b) of this Subpart, by March 15, 1998, or upon initial start-up, the owner or operator of a coating line or a group of coating lines referenced in subsection (b) of this Section shall certify to the Agency that the source is exempt under the provisions of Section 218.208(b) of this Subpart. Such certification shall include:

A) A declaration that the source is exempt from the limitations of Section 218.204(l) of this Subpart because of Section 218.208(b) of this Subpart; and

B) Calculations which demonstrate that the source meets the criteria for exemption because of Section 218.208(b) of this Subpart.

3) For sources exempt under Section 218.208(a) of this Subpart, on and after a date consistent with Section 218.106 of this Part, the owner or operator of a coating line or group of coating lines referenced in this subsection shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating as applied on each coating line; and

B) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.

4) For sources exempt under Section 218.208(b) of this Subpart, on and after March 15, 1998, the owner or operator of a coating line or group of coating lines referenced in this subsection (b) shall collect and record all of the following information for each coating line and maintain the information at the source for a period of three years:
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A) The name and identification number of each coating as applied on each coating line; and

B) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied on each coating line on a monthly basis.

5) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a coating line or group of coating lines exempted from the limitations of Section 218.204 of this Subpart because of Section 218.208(a) of this Subpart shall notify the Agency of any record showing that total VOM emissions from the coating line or group of coating lines exceed 6.8 kg (15 lbs) in any day before the application of capture systems and control devices by sending a copy of such record to the Agency within 30 days after the exceedance occurs.

6) On and after March 15, 1998, any owner or operator of a source exempt from the limitations of Section 218.204(l) of this Subpart because of Section 218.208(b) of this Subpart shall notify the Agency if the source's VOM emissions exceed the limitations of Section 218.208(b) of this Subpart by sending a copy of calculations showing such an exceedance within 30 days after the change occurs.

c) Any owner or operator of a coating line subject to the limitations of Section 218.204 of this Subpart other than Section 218.204(a)(2) or (a)(3) of this Subpart and complying by means of Section 218.204 of this Subpart shall comply with the following:

1) By a date consistent with Section 218.106 of this Part, or upon initial start-up of a new coating line, or upon changing the method of compliance from an existing subject coating line from Section 218.205, Section 218.207, Section 218.215, or Section 218.216 of this Subpart to Section 218.204 of this Subpart; the owner or operator of a subject coating line shall certify to the Agency that the coating line will be in compliance with Section 218.204 of this Subpart on and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date. Such certification shall include:
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A) The name and identification number of each coating as applied on each coating line;

B) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line; and

C) On and after March 15, 1998, for coating lines subject to the limitations of Section 218.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied each day on each coating line; and

D) For coating lines subject to the limitations of Section 218.204(p) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

2) On and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating line shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating as applied on each coating line;

B) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line;

C) On and after March 15, 1998, for coating lines subject to the limitations of Section 218.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied each day on each coating line and certified product data sheets for each coating; and

D) On and after March 15, 1998, for wood furniture coating spray booths subject to the limitations of Section 218.204(l)(4)(A) of this Subpart, the weight of VOM per weight of solids in each strippable spray booth coating as applied each day on each spray booth and
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certified product data sheets for each coating; and-

E) For coating lines subject to the limitations of Section 218.204(p) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

3) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a subject coating line shall notify the Agency in the following instances:

A) Any record showing violation of Section 218.204 of this Subpart shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance from Section 218.204 of this Subpart to Section 218.205 or Section 218.207 of this Subpart, the owner or operator shall comply with all requirements of subsection (d)(1) or (e)(1) of this Section below, respectively. Upon changing the method of compliance from Section 218.204 of this Subpart to Section 218.205 of this Subpart or Section 218.207 of this Subpart, the owner or operator shall comply with all requirements of subsection (d) or (e) of this Section, respectively.

d) Any owner or operator of a coating line subject to the limitations of Section 218.204 of this Subpart and complying by means of Section 218.205 of this Subpart shall comply with the following:

1) By a date consistent with Section 218.106 of this Part, or upon initial start-up of a new coating line, or upon changing the method of compliance for an existing subject coating line from Section 218.204 or Section 218.207 of this Subpart to Section 218.205 of this Subpart; the owner or operator of the subject coating line shall certify to the Agency that the coating line will be in compliance with Section 218.205 of this Subpart on and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date. Such certification shall include:

A) The name and identification number of each coating line which
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will comply by means of Section 218.205 of this Subpart.

B) The name and identification number of each coating as applied on each coating line.

C) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.

D) On and after March 15, 1998, for coating lines subject to the limitations of Section 218.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied each day on each coating line.

E) For coating lines subject to the limitations of Section 218.204(p) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

F) The instrument or method by which the owner or operator will accurately measure or calculate the volume of each coating as applied each day on each coating line.

G) The method by which the owner or operator will create and maintain records each day as required in subsection (d)(2) of this Section.

H) An example of the format in which the records required in subsection (d)(2) of this Section will be kept.

2) On and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating line shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating as applied on each coating line.
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B) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.

C) On and after March 15, 1998, for coating lines subject to the limitations of Section 218.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied each day on each coating line.

D) For coating lines subject to the limitations of Section 218.204(p) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

E) The daily-weighted average VOM content of all coatings as applied on each coating line as defined in Section 218.104 of this Part.

3) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a subject coating line shall notify the Agency in the following instances:

A) Any record showing violation of Section 218.205 of this Subpart shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with this Subpart from Section 218.205 of this Subpart to Section 218.204 or Section 218.207 of this Subpart, the owner or operator shall comply with all requirements of subsection (c)(1) or (e)(1) of this Section, respectively. Upon changing the method of compliance with this subpart from Section 218.205 to Section 218.204 or Section 218.207 of this Subpart, the owner or operator shall comply with all requirements of subsection (c) or (e) of this Section, respectively.

e) Any owner or operator of a coating line subject to the limitations of Section 218.207 of this Subpart and complying by means of Section 218.207(c), (d), (e), (f), (g), or (h), or (l) of this Subpart shall comply with the following:
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1) By a date consistent with Section 218.106 of this Part, or upon initial start-up of a new coating line, or upon changing the method of compliance for an existing coating line from Section 218.204 or Section 218.205 of this Subpart to Section 218.207 of this Subpart, the owner or operator of the subject coating line shall perform all tests and submit to the Agency the results of all tests and calculations necessary to demonstrate that the subject coating line will be in compliance with Section 218.207 of this Subpart on and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date.

2) On and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating line shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

   A) The weight of VOM per volume of coating solids as applied each day on each coating line, if complying pursuant to Section 218.207(b)(2) of this Subpart.

   B) Control device monitoring data.

   C) A log of operating time for the capture system, control device, monitoring equipment and the associated coating line.

   D) A maintenance log for the capture system, control device and monitoring equipment detailing all routine and non-routine maintenance performed including dates and duration of any outages.

3) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a subject coating line shall notify the Agency in the following instances:

   A) Any record showing violation of Section 218.207 of this Subpart shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.
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B) At least 30 calendar days before changing the method of compliance with this Subpart from Section 218.207 of this Subpart to Section 218.204 or Section 218.205 of this Subpart, the owner or operator shall comply with all requirements of subsection (c)(1) or (d)(1) of this Section, respectively. Upon changing the method of compliance with this subpart from Section 218.207 of this Subpart to Section 218.204 or Section 218.205 of this Subpart, the owner or operator shall comply with all requirements of subsection (c) or (d) of this Section, respectively.

f) Any owner or operator of a primer surfacer operation or topcoat operation subject to the limitations of Section 218.204(a)(2) or (a)(3) of this Subpart shall comply with the following:

1) By a date consistent with Section 218.106 of this Part, or upon initial start-up of a new coating operation, the owner or operator of a subject coating operation shall certify to the Agency that the operation will be in compliance with Section 218.204 of this Subpart on and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date. Such certification shall include:

A) The name and identification number of each coating operation which will comply by means of Section 218.204(a)(2) and (a)(3) of this Subpart and the name and identification number of each coating line in each coating operation.

B) The name and identification number of each coating as applied on each coating line in the coating operation.

C) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.

D) The transfer efficiency and control efficiency measured for each coating line.

E) Test reports, including raw data and calculations documenting the testing performed to measure transfer efficiency and control efficiency.
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F) The instrument or method by which the owner or operator will accurately measure or calculate the volume of each coating as applied each day on each coating line.

G) The method by which the owner or operator will create and maintain records each day as required in subsection (f)(2) below.

H) An example format for presenting the records required in subsection (f)(2) below.

2) On and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating operation shall collect and record all of the following information each day for each operation and maintain the information at the source for a period of three years:

A) All information necessary to calculate the daily-weighted average VOM emissions from the coating operations in kg (lbs) per 1 (gal) of coating solids deposited in accordance with the proposal submitted, and approved pursuant to Section 218.204(a)(2) or (a)(3) of this Subpart including:

i) The name and identification number of each coating as applied on each coating operation.

ii) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating operation.

B) If a control device or devices are used to control VOM emissions, control device monitoring data; a log of operating time for the capture system, control device, monitoring equipment and the associated coating operation; and a maintenance log for the capture system, control device and monitoring equipment, detailing all routine and non-routine maintenance performed including dates and duration of any outages.
3) On and after a date consistent with Section 218.106 of this Part or on and after the initial start-up date, the owner or operator of a subject coating operation shall determine and record the daily VOM emissions in kg (lbs) per 1 (gal) of coating solids deposited in accordance with the proposal submitted and approved pursuant to Section 218.204(a)(2) or (a)(3) of this Subpart within 10 days from the end of the month and maintain this information at the source for a period of three years.

4) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a subject coating operation shall notify the Agency in the following instances:

A) Any record showing a violation of Section 218.204(a)(2) or (a)(3) of this Subpart shall be reported by sending a copy of such record to the Agency within 15 days from the end of the month in which the violation occurred.

B) The owner or operator shall notify the Agency of any change to the operation at least 30 days before the change is effected. The Agency shall determine whether or not compliance testing is required. If the Agency determines that compliance testing is required, then the owner or operator shall submit a testing proposal to the Agency within 30 days and test within 30 days of the approval of the proposal by the Agency and USEPA.

g) On and after a date consistent with Section 218.106(e) of this Part, or on and after the initial start-up date, whichever is later, the owner or operator of a flat wood paneling coating line subject to the requirements in Section 218.217 of this Subpart shall comply with the following:

1) By May 1, 2010, or upon initial start-up, whichever is later, submit a certification to the Agency that includes a description of the practices and procedures that the source will follow to ensure compliance with the applicable requirements in Section 218.217(c) and 218.217(d) of this Subpart; and

2) Notify the Agency of any violation of Section 218.217 of this Subpart by providing a description of the violation and copies of records documenting such violation to the Agency within 30 days following the occurrence of
Section 218.212 Cross-Line Averaging to Establish Compliance for Coating Lines

a) On and after March 15, 1996, any owner or operator of a coating line subject to the limitations set forth in Section 218.204 of this Subpart, except coating lines subject to the limitations in Section 218.204(p) of this Subpart, and with coating lines in operation prior to January 1, 1991 ("pre-existing coating lines"), may, for pre-existing coating lines only, elect to comply with the requirements of this Section, rather than complying with the applicable emission limitations set forth in Section 218.204, if an operational change of the type described below has been made after January 1, 1991, to one or more pre-existing coating lines at the source. An operational change occurs when a pre-existing coating line is replaced with a line using lower VOM coating for the same purpose as the replaced line ("replacement line"). A source electing to rely on this Section to demonstrate compliance with the requirements of this Subpart shall operate pursuant to federally enforceable permit conditions approved by the Agency and USEPA.

b) An owner or operator of pre-existing coating lines subject to a VOM content limitation in Section 218.204 of this Subpart and electing to rely on this Section to demonstrate compliance with this Subpart must establish, by use of the equations in subsection (d) of this Section, that the calculated daily VOM emissions from all participating coating lines, as defined below, are less than the calculated daily allowable VOM emissions from the same group of coating lines. For any pre-existing coating line to be aggregated for the purposes of Section 218.212, 218.213, or 218.214 of this Subpart ("participating coating lines"), the source must establish that:

1) All coatings applied on the participating coating line shall, at all times, have a VOM content less than or equal to the applicable VOM content limitation for such coating listed in Appendix H of this Part; and

2) On the date the source elects to rely on this Section to demonstrate compliance with this Subpart, all coatings applied on the participating coating line are not already in compliance with the VOM content limitation for such coating effective on or after March 15, 1996; or the participating coating line is a replacement line, as defined in subsection (a)
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of this Section with an operational change occurring on or after January 1, 1991.

c) Notwithstanding subsection (a) of this Section, any owner or operator of a coating line subject to the limitations set forth in Section 218.204 of this Subpart and electing to rely on this Section to demonstrate compliance with this Subpart, may also include as a participating coating line, until December 31, 1999, only, any replacement line that satisfies all of the following conditions:

1) The replacement line is operated as a powder coating line;

2) The replacement line was added after July 1, 1988; and

3) The owner or operator also includes as a participating coating line one or more coating lines that satisfy the criteria of a replacement line, as described in subsection (a) of this Section.

d) To demonstrate compliance with this Section, a source shall establish the following:

1) An alternative daily emission limitation shall be determined for all participating coating lines at the source according to subsection (d)(2) of this Section. All participating coating lines shall be factored in each day to demonstrate compliance. Provided compliance is established pursuant to the requirements in this subsection, nothing in this Section requires daily operation of each participating line. Actual daily emissions from all participating coating lines ($E_d$) shall never exceed the alternative daily emission limitation ($A_{d}$) and shall be calculated by use of the following equation:

$$E_d = \sum_{i=1}^{n} V_i C_i$$

where:

$$E_d = \text{Actual daily VOM emissions from participating coating lines in units of kg/day (lbs/day);}$$
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i = Subscript denoting a specific coating applied;

n = Total number of coatings applied by all participating coating lines at the source;

\( V_i \) = Volume of each coating applied for the day in units of l/day (gal/day) of coating (minus water and any compounds which are specifically exempted from the definition of VOM); and

\( C_i \) = The VOM content of each coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM).

2) The alternative daily emission limitation \( (A_{d(d)}) \) shall be determined for all participating coating lines at the source on a daily basis as follows:

\[ A_d = A_i + A_p \]

where \( A_i \) and \( A_p \) are defined in subsections (2)(A) and (2)(B) of this Section.

A) The portion of the alternative daily emissions limitation for coating operations at a source using non-powder coating \( (A_i) \) shall be determined for all such participating non-powder coating lines on a daily basis as follows:

\[ A_i = \sum_{i=1}^{n} V_i L_i \frac{(D_i - C_i)}{(D_i - L_i)} \]

where:

\( A_i \) = The VOM emissions allowed for the day in units of kg/day (lbs/day);

i = Subscript denoting a specific coating applied;
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\( n \) = Total number of coatings applied in the participating coating lines;

\( C_i = \) The VOM content of each coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);

\( D_i = \) The density of VOM in each coating applied. For the purposes of calculating \( A_i \), the density is 0.882 kg VOM/l VOM (7.36 lbs VOM/gal VOM);

\( V_i = \) Volume of each coating applied for the day in units of l (gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM); and

\( L_i = \) The VOM emission limitation for each coating applied, as specified in Section 218.204 of this Subpart, in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM).

B) The portion of the alternative daily emission limitation for coating operations at a source using powdered coating (\( A_p \)) shall be determined for all such participating powder coating lines at the source on a daily basis as follows:

\[
A_p = \sum_{h=1}^{m} \sum_{j=1}^{n} \frac{V_j L_j D_j K_h}{(D_j - L_j)}
\]

where:

\( A_p = \) The VOM emissions allowed for the day in units of kg/day (lbs/day);

\( h = \) Subscript denoting a specific powder coating line;

\( j = \) Subscript denoting a specific powder coating applied;
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m = Total number of participating powder coating lines;

n = Total number of powder coatings applied in the participating coating lines;

D_j = The assumed density of VOM in liquid coating, 0.882 kg VOM/l VOM (7.36 lbs VOM/gal VOM);

V_j = Volume of each powder coating consumed for the day in units of l (gal) of coating; and

L_j = The VOM emission limitation for each coating applied, as specified in Section 218.204 of this Subpart, in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM); and

K = A constant for each individual coating line representing the ratio of the volume of coating solids consumed on the liquid coating system which has been replaced to the volume of powder coating consumed on the replacement line to accomplish the same coating job. This value shall be determined by the source based on tests conducted and records maintained pursuant to the requirements of Section 218.213 of this Subpart demonstrating the amount of coating solids consumed as both liquid powder. Test methods and recordkeeping requirements shall be approved by the Agency and USEPA and shall be contained in the source's operating permit as federally enforceable permit conditions, subject to the following restrictions:

i) K cannot exceed 0.9 for non-recycled powder coating systems; or

ii) K cannot exceed 2.0 for recycled powder coating systems.

(Source: Amended at 34 Ill. Reg. _____, effective ____________)

Section 218.217 Wood Furniture Coating and Flat Wood Paneling Coating Work Practice Standards

a) Spray booth cleaning. Each owner or operator of a source subject to the
limitations of Section 218.204(l) of this Subpart shall not use compounds containing more than 8.0 percent, by weight, of VOM for cleaning spray booth components other than conveyors, continuous coaters and their enclosures, and metal filters, unless the spray booth is being refurbished. If the spray booth is being refurbished, that is, the spray booth coating or other material used to cover the booth is being replaced, the affected source shall use no more than 1.0 gallon of organic solvent to prepare the booth prior to applying the booth coating.

b) Application equipment requirements. No owner or operator of a source subject to the limitations of Section 218.204(l) of this Subpart shall use conventional air spray guns to apply coating materials to wood furniture under the circumstances specified in subsections (b)(1) through (4) of this Section:

1) To apply coating materials that have a VOM content no greater than 1.0 kg VOM/kg solids (1.0 lb VOM/lb solids), as applied;

2) For repair coating under the following circumstances:
   A) The coating materials are applied after the completion of the coating operation; or
   B) The coating materials are applied after the stain and before any other type of coating material is applied, and the coating materials are applied from a container that has a volume of no more than 2.0 gallons;

3) If the spray gun is aimed and triggered automatically, rather than manually; or

4) If emissions from the finishing application station are directed to a control device pursuant to Section 218.216 of this Subpart

cb) Cleaning and storage requirements. Each owner or operator of a source subject to the limitations of Section 218.204(l) or 218.204(p) of this Subpart shall:

1) Keep, store, and dispose of all coating, cleaning, and washoff materials in closed containers;

2) Pump or drain all organic solvent used for line cleaning into closed
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containers;

3) Collect all organic solvent used to clean spray guns in closed containers; and

4) Control emissions from washoff operations by using closed tanks.

d) Additional cleaning and storage requirements for flat wood paneling coating lines. Every owner or operator of a source subject to the limitations of Section 218.204(p) of this Subpart shall:

1) Minimize spills of VOM-containing coatings, thinners, and cleaning materials and clean up spills immediately;

2) Minimize emissions of VOM during the cleaning of storage, mixing, and conveying equipment; and

3) Keep mixing vessels that contain VOM-containing coatings and other VOM-containing materials closed except when specifically in use.

e) Application equipment requirements. No owner or operator of a source subject to the limitations of Section 218.204(l) of this Subpart shall use conventional air spray guns to apply coating materials to wood furniture except under the circumstances specified in subsections (c)(1) through (4) of this Section:

1) To apply coating materials that have a VOM content no greater than 1.0 kg VOM/kg solids (1.0 lb VOM/lb solids), as applied;

2) For repair coating under the following circumstances:

A) The coating materials are applied after the completion of the coating operation; or

B) The coating materials are applied after the stain and before any other type of coating material is applied, and the coating materials are applied from a container that has a volume of no more than 2.0 gallons;

3) If the spray gun is aimed and triggered automatically, rather than
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...manually; or...

4) If emissions from the finishing application station are directed to a control device pursuant to Section 218.216 of this Subpart.

(Source: Amended at 34 Ill. Reg. _____, effective ____________)

SUBPART H: PRINTING AND PUBLISHING

Section 218.401 Flexographic and Rotogravure Printing

a) No owner or operator of a subject flexographic, packaging rotogravure or publication rotogravure printing line shall apply at any time any coating or ink unless the VOM content does not exceed the limitation specified in either subsection (a)(1) or (a)(2), as applicable below. Compliance with this Section must be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 218.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 218.404(c) of this Part. As an alternative to compliance with this subsection, a subject printing line may meet the requirements of subsection (b) or (c) below.

1) Prior to May 1, 2010, either:

A) Forty percent VOM by volume of the coating and ink (minus water and any compounds which are specifically exempted from the definition of VOM); or

B) Twenty-five percent VOM by volume of the volatile content in the coating and ink; and,

2) On and after May 1, 2010:

A) For owners operators of flexographic or rotogravure printing lines that do not print flexible packaging, either:

i) Forty percent VOM by volume of the coating and ink (minus water and any compounds that are specifically exempted from the definition of VOM); or
ii) Twenty-five percent VOM by volume of the volatile content in the coating and ink;

B) For owners or operators of flexographic or rotogravure printing lines that print flexible packaging, or that print flexible packaging and non-flexible packaging on the same line, either:

i) 0.8 kg VOM/kg (0.8 lbs VOM/lb) solids applied; or

ii) 0.16 kg VOM/kg (0.16 lbs VOM/lb) inks and coatings applied.

b) Weighted averaging alternative.

1) Prior to May 1, 2010, no owner or operator of a subject flexographic, packaging rotogravure or publication rotogravure printing line shall apply coatings or inks on the subject printing line unless the weighted average, by volume, VOM content of all coatings and inks as applied each day on the subject printing line does not exceed the limitation specified in either subsection (a)(1)(A) (as determined by subsection (b)(1)(A)) or subsection (a)(12)(B) (as determined by subsection (b)(12)(B)). Compliance with this subsection must be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 218.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 218.404(d) of this Part.

A4) The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(1)(A) of this Section.

\[ Vom_{(1)(A)} = \frac{\sum_{i=1}^{n} C_i L_i (\sum_{s=1}^{i} VOM_s)^{c_i}}{\sum_{i=1}^{n} L_i (\sum_{s=1}^{i} VOM_s)^{c_i}} \]

where:

...
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\[ \text{VOM}_{(i)(A)} = \text{The weighted average VOM content in units of percent VOM by volume of all coatings and inks (minus water and any compounds which are specifically exempted from the definition of VOM) used each day;} \]

\[ i = \text{Subscript denoting a specific coating or ink as applied;} \]

\[ n = \text{The number of different coatings and/or inks as applied each day on a printing line;} \]

\[ C_i = \text{The VOM content in units of percent VOM by volume of each coating or ink as applied (minus water and any compounds which are specifically exempted from the definition of VOM);} \]

\[ L_i = \text{The liquid volume of each coating or ink as applied in units of l (gal);} \]

\[ V_{si} = \text{The volume fraction of solids in each coating or ink as applied;} \]

\[ V_{VOMi} = \text{The volume fraction of VOM in each coating or ink as applied.} \]

\[ B^2) \quad \text{The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(12)(B) of this Section.} \]

\[ \text{Vom}_{(i)(B)} = \frac{\sum_{i=1}^{n} C_i L_i V_{ymi}}{\sum_{i=1}^{n} L_i V_{ymi}} \]

where:

\[ \text{VOM}_{(i)(B)} = \text{The weighted average VOM content in units of percent VOM by volume of the volatile content of all coatings and inks used each day;} \]
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\[ i \] = Subscript denoting a specific coating or ink as applied;

\[ n \] = The number of different coatings and/or inks as applied each day on each printing line;

\[ C_i \] = The VOM content in units of percent VOM by volume of the volatile matter in each coating or ink as applied;

\[ L_i \] = The liquid volume of each coating or ink as applied in units of l (gal) and

\[ V_{VMi} \] = The volume fraction of volatile matter in each coating or ink as applied.

2) On and after May 1, 2010, no owner or operator of a subject flexographic or rotogravure printing line that does not print flexible packaging shall apply coatings or inks on the subject printing line unless the weighted average, by weight, VOM content of all coatings and inks as applied each day on the subject printing line does not exceed the limitation specified in either subsection (a)(2)(A)(i) (calculated in accordance with the equation in subsection (b)(1)(A)) or subsection (a)(2)(A)(ii) (calculated in accordance with the equation in subsection (b)(1)(B)) of this Section. Compliance with this subsection (b)(2) shall be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 218.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 218.404(d) of this Subpart.

3) On and after May 1, 2010, no owner or operator of a subject flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, shall apply coatings or inks on the subject printing line unless the weighted average, by weight, VOM content of all coatings and inks as applied each day on the subject printing line does not exceed the limitation specified in either subsection (a)(2)(B)(i) (calculated in accordance with the equation in subsection (b)(3)(A)) or subsection (a)(2)(B)(ii) (calculated in accordance with the equation in subsection (b)(3)(B)) of this Section. Compliance with this subsection (b)(3) shall be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 218.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 218.404(d) of this Subpart.
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A) The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(2)(B)(i) of this Section.

\[ Vom_{(A)} = \frac{\sum_{i=1}^{n} C_i W_i}{\sum_{i=1}^{n} W_i} \]

where:

- \( VOM_{(A)} \) = The weighted average VOM content in units of kg VOM per kg (lbs VOM per lb) solids of all coatings and inks used each day;
- \( i \) = Subscript denoting a specific coating or ink as applied;
- \( n \) = The number of different coatings and/or inks as applied each day on a printing line;
- \( C_i \) = The VOM content in units of kg VOM per kg (lbs VOM per lb) solids of each coating or ink as applied;
- \( W_i \) = Weight of solids in each coating or ink, as applied, in units of kg/l (lb/gal).

B) The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(2)(B)(ii) of this Section.

\[ Vom_{(B)} = \frac{\sum_{i=1}^{n} C_i L_i}{\sum_{i=1}^{n} L_i} \]

where:
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\[
\text{VOM}_{(B)} = \text{The weighted average VOM content in units of kg (lbs) VOM per weight in kg (lbs) of all coatings or inks as applied each day;}
\]

\[i = \text{Subscript denoting a specific coating or ink as applied;}
\]

\[n = \text{The number of different coatings and/or inks as applied each day on each printing line;}
\]

\[C_i = \text{The VOM content in units of kg (lbs) VOM per weight in kg (lbs) of each coating or ink as applied;}
\]

\[L_i = \text{The weight of each coating or ink, as applied, in units of kg/l (lb/gal).}
\]

c) Capture system and control device requirements.

1) Prior to May 1, 2010, no owner or operator of a subject flexographic, packaging rotogravure or publication rotogravure printing line equipped with a capture system and control device shall operate the subject printing line unless the owner or operator meets the requirements in subsection (c)(1)(A), (c)(1)(B)(2), or (c)(1)(C), as well as subsections (c)(1)(D), (c)(5), and (c)(6) below.

A One of:

i) 4) A carbon adsorption system is used that reduces the captured VOM emissions by at least 90 percent by weight or

ii) 2) An incineration system is used that reduces the captured VOM emissions by at least 90 percent by weight or

iii) 3) An alternative VOM emission reduction system is used that is demonstrated to have at least a 90 percent control device efficiency, approved by the Agency and approved by USEPA as a SIP revision, and

B 4) The printing line is equipped with a capture system and control
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device that provides an overall reduction in VOM emissions of at least:

i(A) 75 percent where a publication rotogravure printing line is employed;

ii(B) 65 percent where a packaging rotogravure printing line is employed;

iii(C) 60 percent where a flexographic printing line is employed;

2) On and after May 1, 2010, no owner or operator of a flexographic or rotogravure printing line that does not print flexible packaging and that is equipped with a capture system and control device shall operate the subject printing line unless the owner or operator meets the requirements in subsection (c)(1)(A), (c)(1)(B), or (c)(1)(C), as well as subsections (c)(1)(D), (c)(5), and (c)(6) of this Section;

3) On and after May 1, 2010, no owner or operator of a flexographic or rotogravure printing line that prints flexible packaging and that is equipped with a capture system and control device shall operate the subject printing line unless the owner or operator meets the requirements in subsections (c)(5) and (c)(6) of this Section and the capture system and control device provides an overall reduction in VOM emissions of at least:

A) 65 percent in cases in which a subject printing line was first constructed at the subject source prior to March 14, 1995 and utilizes a control device that was first constructed at the subject source prior to January 1, 2010; or

B) 70 percent when a subject printing line was first constructed at the subject source prior to March 14, 1995 and utilizes a control device that was first constructed at the subject source on or after January 1, 2010; or

C) 75 percent when a subject printing line was first constructed at the subject source on or after March 14, 1995 and utilizes a control device.
device that was first constructed at the subject source prior to January 1, 2010; or

D) 80 percent when a subject printing line was first constructed at the subject source on or after March 14, 1995 and utilizes a control device that was first constructed at the subject source on or after January 1, 2010;

4) On and after May 1, 2010, the owner or operator of a flexographic or rotogravure printing line that prints flexible packaging and non-flexible packaging on the same line and that is equipped with a control device shall be subject to the requirements of either subsection (c)(1)(D) or subsection (c)(3) of this Section, whichever is more stringent, as well as subsections (c)(5) and (c)(6) of this Section;

5) The control device is equipped with the applicable monitoring equipment specified in Section 218.105(d)(2) of this Part and except as provided in Section 218.105(d)(3) of this Part, the monitoring equipment is installed, calibrated, operated and maintained according to vendor specifications at all times the control device is in use;

6) The capture system and control device are operated at all times when the subject printing line is in operation. The owner or operator shall demonstrate compliance with this subsection by using the applicable capture system and control device test methods and procedures specified in Section 218.105(c) through Section 218.105(f) of this Part and by complying with the recordkeeping and reporting requirements specified in Section 218.404(e) of this Part. The owner or operator of a printing line subject to the requirements in Section 218.401(c)(2) or 218.401(c)(1)(D) of this Section that performed all testing necessary to demonstrate compliance with Section 218.401(c)(1)(D) prior to May 1, 2010 is not required to retest pursuant to this subsection (c)(6). The owner or operator of a printing line subject to the requirements in Section 218.401(c)(3) shall perform testing in compliance with this subsection (c)(6), even if the owner or operator already performed such testing prior to May 1, 2010, unless the following conditions are met. Nothing in this subsection (c)(6), however, shall limit the Agency's ability to require that the owner or operator perform testing pursuant to 35 Ill. Adm. Code 201.282.
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A) On or after May 1, 2000, the owner or operator of the subject printing line performed all testing necessary to demonstrate compliance with Section 218.401(c)(1)(D);

B) Such testing also demonstrated an overall control efficiency equal to or greater than the applicable control efficiency requirements in Section 218.401(c)(3);

C) The owner or operator submitted the results of such tests to the Agency, and the tests were not rejected by the Agency;

D) The same capture system and control device subject to the tests referenced in subsection (c)(6)(A) of this Section is still being used by the subject printing line; and

E) The owner or operator complies with all recordkeeping and reporting requirements in Section 218.404(e)(1)(B).

d) No owner or operator of subject flexographic or rotogravure printing lines that print flexible packaging or print flexible packaging and non-flexible packaging on the same line shall cause or allow VOM containing cleaning materials, including used cleaning towels, associated with the subject flexographic or rotogravure printing lines to be kept, stored, or disposed of in any manner other than in closed containers, or conveyed from one location to another in any manner other than in closed containers or pipes, except when specifically in use.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 218.402 Applicability

a) Except as otherwise provided in Section 218.401, the limitations of Section 218.401 of this SubpartPart apply to all flexographic and rotogravure printing lines at a subject source. Sources with flexographic and/or rotogravure printing lines are subject sources if:

1) Total maximum theoretical emissions of VOM from all flexographic and rotogravure printing lines (including solvents used for cleanup operations associated with flexographic and rotogravure printing at the source ever exceed 90.7 Mg (100 tons) per calendar
year and the flexographic and rotogravure printing lines (including solvents used for cleanup operations associated with flexographic and rotogravure printing lines) at the source are not limited to less than 90.7 Mg (100 tons) of VOM emissions per calendar year in the absence of air pollution control equipment through production or capacity limitations contained in a federally enforceable permit or a SIP revision; or

2) The flexographic and rotogravure printing lines (including solvents used for cleanup operations associated with flexographic and rotogravure printing lines) at the source have a potential to emit 22.7 Mg (25 tons) or more of VOM per year.

b) The limitations of Section 218.401(d) shall apply to all owners or operators of flexographic or rotogravure printing lines that print flexible packaging, or that print flexible packaging and non-flexible packaging on the same line, at a source where the combined emissions of VOM from all flexographic and rotogravure printing lines total 6.8 kg/day (15 lbs/day) or more (including solvents used for cleanup operations associated with flexographic and rotogravure printing lines), in the absence of air pollution control equipment.

cb) Upon achieving compliance with this Subpart, the flexographic and rotogravure printing lines are not required to meet Subpart G (Sections 218.301 or 218.302 of this Part). Flexographic and rotogravure printing lines exempt from this Subpart are subject to Subpart G (Sections 218.301 or 218.302 of this Part). Rotogravure or flexographic equipment used for both roll printing and paper coating is subject to this Subpart.

dc) Once subject to the limitations of Section 218.401, a flexographic or rotogravure printing line is always subject to the limitations of Section 218.401 of this Part.

dd) Any owner or operator of any flexographic or rotogravure printing line that is exempt from any of the limitations of Section 218.401 of this Part because of the criteria in this Section is subject to the recordkeeping and reporting requirements specified in Section 218.404(b) and (f) of this Part, as applicable.

(Source: Amended at 34 Ill. Reg. _______, effective ____________)

Section 218.403  Compliance Schedule
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Every owner or operator of a flexographic and/or rotogravure printing line shall comply with the applicable requirements of Section 218.401 and Section 218.404 of this Part in accordance with the applicable compliance schedule specified in subsection (a), (b), (c) or (d), (e), (f), or (g) below:

a) No owner or operator of a flexographic or rotogravure printing line that is exempt from the limitations of Section 218.401 of this Part because of the criteria in Section 218.402(a) of this Part shall operate said printing line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 218.404(b) of this Part.

b) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 218.401(a)(1) of this Part shall operate said printing line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 218.401(a)(1) and Section 218.404(c) of this Part.

c) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 218.401(b)(1) of this Part shall operate said printing line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 218.401(b)(1) and Section 218.404(d) of this Part.

d) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 218.401(c)(1)(D) of this Part shall operate said printing line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, the applicable provisions in Sections 218.401(c) and 218.404(e) of this Part.

e) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 218.401(a)(2), (b)(2), or (b)(3) or complying by means of Section 218.401(c)(2), (c)(3), or (c)(4), shall operate the printing line on or after May 1, 2010, unless the owner or operator has complied with, and continues to comply with, Section 218.401(a)(2), (b)(2) or (b)(3), and Section 218.401(c), as applicable, and all applicable provisions in Section 218.404 of this Part.

f) No owner or operator of a flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, shall operate the printing line on or after May 1, 2010, unless the
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owner or operator has complied with, and continues to comply with, Section 218.401(d) and Section 218.404(g) of this Part.

g) No owner or operator of a flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, and that is exempt from the limitations of Section 218.401(d) because of the criteria in Section 218.402(b) of this Part shall operate the printing line on or after May 1, 2010, unless the owner or operator has complied with, and continues to comply with, Section 218.402(b) and Section 218.404(f) of this Part.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 218.404  Recordkeeping and Reporting

a) The VOM content of each coating and ink and the efficiency of each capture system and control device shall be determined by the applicable test methods and procedures specified in Section 218.105 of this Part to establish the records required under this Section.

b) Any owner or operator of a printing line which is exempted from any of the limitations of Section 218.401 of this Part because of the criteria in Section 218.402(a) of this Part shall comply with the following:

1) By a date consistent with Section 218.106 of this Part or, for flexographic or rotogravure printing lines that print flexible packaging or that print flexible packaging and non-flexible packaging on the same line, by May 1, 2010, the owner or operator of a flexographic or rotogravure printing line to which this subsection (b) is applicable shall certify to the Agency that the flexographic and rotogravure printing line is exempt under the provisions of Section 218.402(a) of this Part. Such certification shall include:

A) A declaration that the flexographic and rotogravure printing line is exempt from the limitations of the criteria in Section 218.401 of this Part because of Section 218.402(a) of this Part.

B) Calculations which demonstrate that total maximum theoretical emissions of VOM from all flexographic and rotogravure printing lines at the source never exceed 90.7 Mg (100 tons) per calendar
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year before the application of capture systems and control devices. Total maximum theoretical emissions of VOM for a flexographic or rotogravure printing source is the sum of maximum theoretical emissions of VOM from each flexographic and rotogravure printing line at the source. The following equation shall be used to calculate total maximum theoretical emissions of VOM per calendar year before the application of capture systems and control devices for each flexographic and rotogravure printing line at the source:

\[ E_p = A \times B + 1095 \times (C \times D \times F) \]

where:

- \( E_p \) = Total maximum theoretical emissions of VOM from one flexographic or rotogravure printing line in units of kg/year (lbs/year);
- \( A \) = Weight of VOM per volume of solids of the coating or ink with the highest VOM content as applied each year on the printing line in units of kg VOM/l (lbs VOM/gal) of coating or ink solids;
- \( B \) = Total volume of solids for all coatings and inks that can potentially be applied each year on the printing line in units of l/year (gal/year). The instrument and/or method by which the owner or operator accurately measured or calculated the volume of each coating and ink as applied and the amount that can potentially be applied each year on the printing line shall be described in the certification to the Agency;
- \( C \) = Weight of VOM per volume of material for the cleanup material or solvent with the highest VOM content as used each year on the printing line in units of kgVOM/l (lbs VOM/gal);
- \( D \) = The greatest volume of cleanup material or solvent used in any 8-hour period; and
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\[ F = \text{The highest fraction of cleanup material or solvent which is not recycled or recovered for offsite disposal during any 8-hour period.} \]

2) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a flexographic and rotogravure printing line referenced in this subsection shall collect and record all of the following information each year for each printing line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content and the volume of each coating and ink as applied each year on each printing line.

3) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a flexographic and rotogravure printing line exempted from the limitations of Section 218.401 of this Part because of the criteria in Section 218.402(a) of this Part shall notify the Agency of any record showing that total maximum theoretical emissions of VOM from all printing lines exceed 90.7 Mg (100 tons) in any calendar year before the application of capture systems and control devices by sending a copy of such record to the Agency within 30 days after the exceedance occurs.

c) Any owner or operator of a printing line subject to the limitations of Section 218.401 of this Part and complying by means of Section 218.401(a) of this Part shall comply with the following:

1) By a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or upon initial start-up of a new printing line, or upon changing the method of compliance from an existing subject printing line from Section 218.401(b) or Section 218.401(c) of this Part to Section 218.401(a) of this Part, the owner or operator of a subject printing line shall certify to the Agency that the printing line will be in compliance with Section 218.401(a) of this Part on and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or on and after the initial start-up date. The owner or operator of a printing line subject to the requirements in Section 218.401(a)(2)(B) shall certify in accordance
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with this subsection (c)(1) even if the owner or operator of such line submitted a certification prior to January 1, 2010. Such certification shall include:

A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content of each coating and ink as applied each day on each printing line.

2) On and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or on and after the initial start-up date, the owner or operator of a printing line subject to the limitations of Section 218.401 of this Part and complying by means of Section 218.401(a) of this Part shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content of each coating and ink as applied each day on each printing line.

3) On and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, the owner or operator of a subject printing line shall notify the Agency in the following instances:

A) Any record showing violation of Section 218.401(a) of this Part shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with Section 218.401 of this Part from Section 218.401(a) of this Part to Section 218.401(b) or (c) of this Part, the owner or operator shall comply with all requirements of subsection (d)(1) or (e)(1) of this Section, respectively. Upon changing the method of compliance with Section 218.401 of this Part from Section 218.401(a) of this Part to Section 218.401(b) or (c) of this Part, the owner or operator shall:

A) Notify the Agency in writing of the change in method of compliance with Section 218.401 of this Part.

B) Provide the Agency with a copy of the certification submitted prior to January 1, 2010, if the owner or operator is subject to the limitations of Section 218.401 of this Part and is complying by means of Section 218.401(a) of this Part.
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Part, the owner or operator shall comply with all requirements of subsection (d) or (e) of this Section, respectively.

d) Any owner or operator of a printing line subject to the limitations of Section 218.401 of this Part and complying by means of Section 218.401(b) shall comply with the following:

1) By a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing subject printing line from Section 218.401(a) or (c) of this Part to Section 218.401(b) of this Part, the owner or operator of the subject printing line shall certify to the Agency that the printing line will be in compliance with Section 218.401(b) of this Part on and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or on and after the initial start-up date. The owner or operator of a printing line subject to the requirements in Section 218.401(b)(3) shall certify in accordance with this subsection (d)(1) even if the owner or operator of such line submitted a certification prior to January 1, 2010. Such certification shall include:

A) The name and identification number of each printing line which will comply by means of Section 218.401(b) of this Part.

B) The name and identification number of each coating and ink available for use on each printing line.

C) The VOM content of each coating and ink as applied each day on each printing line.

D) The instrument or method by which the owner or operator will accurately measure or calculate the volume, or weight of solids, as applicable, of each coating and ink as applied each day on each printing line.

E) The method by which the owner or operator will create and maintain records each day as required in subsection (d)(2) of this Section.

F) An example of the format in which the records required in
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subsection (d)(2) of this Section will be kept.

2) On and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or on and after the initial start-up date, the owner or operator of a printing line subject to the limitations of Section 218.401 of this Part and complying by means of Section 218.401(b) of this Part shall collect and record all of the following information each day for each printing line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content and the volume, or weight of solids, as applicable, of each coating and ink as applied each day on each printing line.

C) The daily-weighted average VOM content of all coatings and inks as applied on each printing line.

3) On and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, the owner or operator of a subject printing line shall notify the Agency in the following instances:

A) Any record showing violation of Section 218.401(b) of this Part shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with Section 218.401 of this Part from Section 218.401(b) of this Part to Section 218.401(a) or 218.401(c) of this Part, the owner or operator shall comply with all requirements of subsection (c)(1) or (e)(1) of this Section, respectively. Upon changing the method of compliance with Section 218.401 of this Part from Section 218.401(b) of this Part to Section 218.401(a) or (c) of this Part, the owner or operator shall comply with all requirements of subsection (c) or (e) of this Section, respectively.

e) Any owner or operator of a printing line subject to the limitations of Section
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218.401 of this Part and complying by means of Section 218.401(c) of this Part shall comply with the following:

1) By a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing printing line from Section 218.401(a) or (b) of this Part to Section 218.401(c) of this Part, the owner or operator of the subject printing line shall either:

A) perform all tests and submit to the Agency the results of all tests and calculations necessary to demonstrate that the subject printing line will be in compliance with Section 218.401(c) of this Part on and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or on and after the initial start-up date; or,

B) if not required to perform such testing pursuant to Section 218.401(c)(6), submit a certification to the Agency that includes:

   i) A declaration that the owner or operator is not required to perform testing pursuant to Section 218.401(c)(6);

   ii) the dates that testing demonstrating compliance with Section 218.401(c)(3) was performed; and

   iii) the dates that the results of such testing were submitted to the Agency.

2) On and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, or on and after the initial start-up date, the owner or operator of a printing line subject to the limitations of Section 218.401 of this Part and complying by means of Section 218.401(c) of this Part shall collect and record all of the following information each day for each printing line and maintain the information at the facility for a period of three years:

A) control device monitoring data.
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B) A log of operating time for the capture system, control device, monitoring equipment and the associated printing line.

C) A maintenance log for the capture system, control device and monitoring equipment detailing all routine and non-routine maintenance performed including dates and duration of any outages.

3) On and after a date consistent with Section 218.106 of this Part, or Section 218.403(e), as applicable, the owner or operator of a subject printing line shall notify the Agency in the following instances:

A) Any record showing violation of Section 218.401(c) of this Part shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with Section 218.401 of this Part from Section 218.401(c) of this Part to Section 218.401(a) or (b) of this Part, the owner or operator shall comply with all requirements of subsection (c)(1) or (d)(1) of this Section, respectively. Upon changing the method of compliance with Section 218.401 of this Part from Section 218.401(c) of this Part to Section 218.401(a) or (b) of this Part, the owner or operator shall comply with all requirements of subsection (c) or (d) of this Section, respectively.

4) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, the owner or operator of a printing line subject to the requirements in Section 218.401(c)(3) or (c)(4) shall submit to the Agency records documenting the date the printing line was constructed at the subject source and the date the control device for such printing line was constructed at the subject source.

f) Any owner or operator of a flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, and that is exempt from the limitations of Section 218.401(d) because of the criteria in Section 218.402(b) shall:
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1) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, and upon modification of a printing line, submit a certification to the Agency that includes:

A) A declaration that the source is exempt from the requirements in Section 218.401(d) because of the criteria in Section 218.402(b);

B) Calculations that demonstrate that combined emissions of VOM from all flexographic and rotogravure printing lines (including inks and solvents used for cleanup operations associated with such printing lines) at the source never equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment; and

2) Notify the Agency in writing if the combined emissions of VOM from all flexographic and rotogravure printing lines (including inks and solvents used for cleanup operations associated with the flexographic and rotogravure lines) at the source ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, within 30 days after the event occurs.

g) Any owner or operator of a printing line subject to the limitations of Section 218.401(d) shall:

1) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, submit a certification to the Agency describing the practices and procedures that the owner or operator will follow to ensure compliance with the limitations of Section 218.401(d); and

2) Notify the Agency of any violation of Section 218.401(d) by sending a description of the violation and copies of records documenting such violations to the Agency within 30 days following the occurrence of the violation.

h) All records required by subsections (f) and (g) of this Section shall be retained for at least three years and shall be made available to the Agency upon request.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 218.405 Lithographic Printing: Applicability
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a) Until March 15, 1996, the limitations of Section 218.406 of this Subpart apply to all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with the heatset web offset lithographic printing line(s)) at a source subject to the requirements of this Subpart. All sources with heatset web offset lithographic printing lines are sources subject to the requirements of this Subpart unless:

1) Total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with the heatset web offset lithographic printing line(s)) at the source never exceed 90.7 Mg (100 tons) per calendar year in the absence of air pollution control equipment; or

2) A federally enforceable permit or SIP revision for all heatset web offset lithographic printing line(s) at a source requires the owner or operator to limit production or capacity of these printing line(s) to reduce total VOM emissions from all heatset web offset lithographic printing line(s) to 90.7 Mg (100 tons) per calendar year or less in the absence of air pollution control equipment.

b) Any owner or operator of any heatset web offset lithographic printing line that is exempt from the limitations in Section 218.406 of this Subpart because of the criteria in subsection (a) of this Section shall be subject to the recordkeeping and reporting requirements in Section 218.406(b)(1) of this Subpart.

c) Every owner or operator of lithographic printing lines is subject to the recordkeeping and reporting requirements in Section 218.411 of this Subpart.

d) Prior to May 1, 2010, Sections 218.407 through 218.410 of this Subpart shall apply to:

1) All owners or operators of heatset web offset lithographic printing lines unless:

A) Total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with heatset web offset lithographic
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printing lines) at the source never exceed 90.7 Mg (100 tons) per calendar year before the application of capture systems and control devices. To determine a source's total maximum theoretical emissions of VOM for the purposes of this subsection, the owner or operator shall use the calculations set forth in Section 218.411(a)(1)(C) of this Subpart; or

B) Federally enforceable permit conditions or SIP revision for all heatset web offset lithographic printing lines at the source requires the owner or operator to limit production or capacity of these printing lines to total VOM emissions of 90.7 Mg/yr (100 TPY) or less, before the application of capture systems and control devices;

2) All owners or operators of heatset web offset, non-heatset web offset, or sheet-fed offset lithographic printing lines, unless the combined emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) never exceed 45.5 kg/day (100 lbs/day), as determined in accordance with Section 218.411(b)(2)(B), before the application of capture systems and control devices;

c) On and after May 1, 2010:

1) The requirements in Section 218.407(a)(1)(B) through (a)(1)(E) and 218.407(b) and all applicable provisions in Sections 218.409 through 218.411 of this Subpart shall apply to all owners or operators of heatset web offset lithographic printing lines, if the combined emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) ever exceed 45.5 kg/day (100 lbs/day), calculated in accordance with Section 218.411(b)(2)(B), before the application of capture systems and control devices;

2) The requirements in Section 218.407(a)(1)(A) and 218.407(a)(2) through(a)(5) and all applicable provisions in Sections 218.409 through 218.411 of this Subpart shall apply to all owners or operators of lithographic printing lines if the combined emissions of VOM from all lithographic printing lines at the source (including solvents used for
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cleanup operations associated with the lithographic printing lines) ever equal or exceed 6.8 kg/day (15 lbs/day), calculated in accordance with Section 218.411(b)(1)(B), before the application of capture systems and control devices;

3) Notwithstanding subsection (c)(2) of this Section, at sources where the combined emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) equal or exceed 6.8 kg/day (15 lbs/day) but do not exceed 45.5 kg/day (100 lbs/day), calculated in accordance with Section 218.411(b)(1)(B), before the application of capture systems and control devices, the following exclusions shall apply unless the owner or operator of the source certifies pursuant to Section 218.411(g)(1)(B) that the source will not make use of any such exclusions:

A) The requirements of Section 218.407(a)(1)(A), 218.407(a)(2), and 218.407(a)(3) of this Subpart shall not apply to lithographic printing lines with a total fountain solution reservoir of less than 3.8 liters (1 gallon);

B) The requirements of Section 218.407(a)(3) of this Subpart shall not apply to sheet-fed offset lithographic printing lines with maximum sheet size of 11x17 inches or smaller;

C) The requirements of Section 218.407(a)(4) of this Subpart shall not apply to up to a total of 416.3 liters (110 gallons) per year of cleaning materials used on all lithographic printing lines at the source;

D) The requirements of Section 218.407(a)(4)(A)(i) shall not apply to lithographic printing lines at the source. Instead, the requirements of Section 218.407(a)(4)(A)(ii) shall apply to such lines.

de) If a lithographic printing line at a source is or becomes subject to one or more of the limitations in Sections 218.406 or 218.407 of this Subpart, the lithographic printing lines at the source are always subject to the applicable provisions of this Subpart.

(Source: Amended at 34 Ill. Reg. _______, effective ____________)}
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a) Emission Standards and Limitations. No owner or operator of a heatset web offset printing line at a source that meets or exceeds the applicability levels in Section 218.405(a) of this Subpart may cause or allow the operation of such heatset web offset printing line(s) unless the owner or operator meets the requirements in subsections (a)(1) or (a)(2) of this Section and the requirements in subsections (a)(3) and (a)(4) of this Section. The owner or operator shall demonstrate compliance with this Section by using the applicable test methods and procedures specified in Section 218.105(a), (d), and (f) of this Part and by complying with the recordkeeping and reporting requirements specified in subsection (b) of this Section:

1) An afterburner system is installed and operated that reduces 90 percent of the VOM emissions (excluding methane and ethane) from the dryer exhaust; or

2) The fountain solution contains no more than 8 percent, by weight, of VOM and a condensation recovery system is installed and operated that removes at least 75 percent of the non-isopropyl alcohol organic materials from the dryer exhaust; and

3) The control device is equipped with the applicable monitoring equipment specified in Section 218.105(d)(2) of this Part and the monitoring equipment is installed, calibrated, operated and maintained according to manufacturer's specifications at all times when the control device is in use; and

4) The control device is operated at all times when the printing line is in operation.

b) Recordkeeping and Reporting. The VOM content of each fountain solution and ink and the efficiency of each control device shall be determined by the applicable test methods and procedures specified in Section 218.105 of this Part to establish the records required under this subsection.

1) Any owner or operator of a lithographic printing line which is exempted
from the limitations of subsection (a) of this Section because of the criteria in 218.405(a) of this Subpart shall comply with the following:

A) By a date consistent with Section 218.106 of this Part, the owner or operator of a heatset web offset lithographic printing line to which subsection (b)(1) of this Section is applicable shall certify to the Agency that the heatset web offset lithographic printing line is exempt under the provisions of Section 218.405(a) of this Subpart. Such certification shall include:

i) A declaration that the heatset web offset lithographic printing line is exempt from the limitations of subsection (a) of this Section because of the criteria in Section 218.405(a) of this Subpart; and

ii) Calculations which demonstrate that total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines at the source never exceed 90.7 Mg (100 tons) per calendar year before the application of air pollution control equipment. Total maximum theoretical emissions of VOM for a heatset web offset lithographic printing source is the sum of maximum theoretical emissions of VOM from each heatset web offset lithographic printing line at the source. The following equation shall be used to calculate total maximum theoretical emissions of VOM per calendar year in the absence of air pollution control equipment for each heatset web offset lithographic printing line at the source:

\[ E_p = (R \times A \times B) + [(C \times D) + 1095 \times F \times G \times H] \]

where:

\[ E_p \quad \text{Total maximum theoretical emissions of VOM from one heatset web offset printing line in units of kg/yr (lb/yr)} \]
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A = Weight of VOM per volume of solids of ink with the highest VOM content as applied each year on the printing line in units of kg/ℓ (lb/gal) of solids;

B = Total volume of solids for all inks that can potentially be applied each year on the printing line in units of ℓ/yr (gal/yr). The instrument or method by which the owner or operator accurately measured or calculated the volume of each ink as applied and the amount that can potentially be applied each year on the printing line shall be described in the certification to the Agency;

C = Weight of VOM per volume of fountain solution with the highest VOM content as applied each year on the printing line in units of kg/ℓ (lb/gal);

D = The total volume of fountain solution that can potentially be used each year on the printing line in units of ℓ/yr (gal/yr). The instrument and/or method by which the owner or operator accurately measured or calculated the volume of each fountain solution used and the amount that can potentially be used each year on the printing line shall be described in the certification to the Agency;

F = Weight of VOM per volume of material for the cleanup material or solvent with the highest VOM content as used each year on the printing line in units of kg/ℓ (lb/gal) of such material;

G = The greatest volume of cleanup material or solvent used in any 8-hour period; and

H = The highest fraction of cleanup material or solvent which is not recycled or recovered for offsite disposal during any 8-hour period.
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\[ R = \text{The multiplier representing the amount of VOM not retained in the substrate being used. For paper, } R = 0.8. \text{ For foil, plastic, or other impervious substrates, } R = 1.0. \]

B) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a heatset web offset lithographic printing line to which subsection (b)(1) of this Section is applicable shall collect and record all of the following information each year for each printing line and maintain the information at the source for a period of three years:

i) The name and identification of each fountain solution and ink as applied on each printing line; and

ii) The VOM content and the volume of each fountain solution and ink as applied each year on each printing line.

C) On and after a date consistent with Section 218.106 of this Part, the owner or operator of a source exempted from the limitations of subsection (a) of this Section because of the criteria in Section 218.405(a) of this Subpart shall notify the Agency of any record showing that total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines exceed 90.7 Mg (100 tons) in any calendar year in the absence of air pollution control equipment by sending a copy of such record to the Agency within 30 days after the exceedence occurs.

2) Any owner or operator of a printing line subject to the limitations of subsection (a) of this Section and complying by means of subsection (a)(1) of this Section shall comply with the following:

A) By a date consistent with Section 218.106 of this Part, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing printing line from subsection (a)(2) to (a)(1) of this Section, perform all tests and submit to the Agency the results of all tests and calculations necessary to demonstrate that the subject printing line will be in compliance with subsection (a)(1) of this Section on and after a date consistent with Section
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218.106 of this Part, or on and after the initial start-up date:

B) On and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date, collect and record the following information each day for each printing line and maintain the information at the source for a period of three years:

i) Control device monitoring data;

ii) A log of operating time for the control device, monitoring equipment and the associated printing line; and

iii) A maintenance log for the control device and monitoring equipment detailing all routine and nonroutine maintenance performed including dates and duration of any outages;

C) On and after a date consistent with Section 218.106 of this Part, notify the Agency in the following instances:

i) Any violation of subsection (a)(1) of this Section shall be reported to the Agency, in writing, within 30 days following the occurrence of the violation;

ii) Any record showing a violation of subsection (a)(1) of this Section shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation; and

iii) At least 30 calendar days before changing the method of compliance with subsection (a) of this Section from subsection (a)(1) to (a)(2) of this Section, the owner or operator shall comply with all requirements of subsection (b)(3)(A) of this Section. Upon changing the method of compliance with subsection (a) of this Section from subsection (a)(1) to (a)(2) of this Section, the owner or operator shall comply with all requirements of subsection (b)(3) of this Section.

3) Any owner or operator of a printing line subject to the limitations of
subsection (a) of this Section and complying by means of subsection (a)(2) of this Section shall:

A) By a date consistent with Section 218.106 of this Part, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing printing line from subsection (a)(1) to (a)(2) of this Section, perform all tests and submit to the Agency and the USEPA the results of all tests and calculations necessary to demonstrate that the subject printing line will be in compliance with subsection (a)(2) of this Section on and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date;

B) On and after a date consistent with Section 218.106 of this Part, or on and after the initial start-up date, collect and record the following information each day for each printing line and maintain the information at the source for a period of three years:

i) The VOM content of the fountain solution used each day on each printing line;

ii) A log of operating time for the control device and the associated printing line; and

iii) A maintenance log for the control device detailing all routine and non-routine maintenance performed including dates and duration of any outages;

C) On and after a date consistent with Section 218.106 of this Part, notify the Agency in the following instances:

i) Any violation of subsection (a)(2) shall be reported to the Agency, in writing, within 30 days following the occurrence of the violation;

ii) Any record showing a violation of subsection (a)(2) of this Section shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation; and
iii) At least 30 calendar days before changing the method of compliance with subsection (a) of this Section from subsection (a)(2) to (a)(1) of this Section, the owner or operator shall comply with all requirements of subsection (b)(2)(A) of this Section. Upon changing the method of compliance with subsection (a) of this Section from subsection (a)(2) to (a)(1) of this Section, the owner or operator shall comply with all requirements of subsection (b)(2) of this Section.

e) Compliance Schedule. Every owner or operator of a heatset web offset lithographic printing line shall comply with the applicable requirements of subsections (a) and (b) of this Section in accordance with the applicable compliance schedule specified in subsections (c)(1), (c)(2), or (c)(3) of this Section:

1) No owner or operator of a heatset web offset lithographic printing line which is exempt from the limitations of subsection (a) of this Section because of the criteria in Section 218.405(a) of this Subpart shall operate said printing line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Sections 218.405(a) and (b)(1) of this Subpart.

2) No owner or operator of a heatset web offset lithographic printing line complying by means of subsection (a)(1) of this Section shall operate said printing line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, subsections (a)(1), (a)(3), (a)(4) and (b)(2) of this Section.

3) No owner or operator of a heatset web offset lithographic printing line complying by means of subsection (a)(2) of this Section shall operate said printing line on or after a date consistent with Section 218.106 of this Part, unless the owner or operator has complied with, and continues to comply with, subsections (a)(2), (a)(3), (a)(4) and (b)(3) of this Section.

(Source: Repealed at 34 Ill. Reg. ______, effective ____________)

Section 218.407 Emission Limitations and Control Requirements for Lithographic
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Printing Lines On and After March 15, 1996

a) No owner or operator of lithographic printing line(s) subject to the requirements of this Subpart shall:

1) Cause or allow the operation of any heatset web offset lithographic printing line unless:

A) The total VOM content in the as-applied fountain solution meets one of the following conditions:

i) 1.6 percent or less, by weight;

ii) 3 percent or less, by weight, and the temperature of the fountain solution is maintained below 15.6° C (60° F), measured at the reservoir or the fountain tray; or

iii) 5 percent or less, by weight, and the as-applied fountain solution contains no alcohol;

B) The air pressure in the dryer is maintained lower than the air pressure of the press room, such that air flow through all openings in the dryer, other than the exhaust, is into the dryer at all times when the printing line is operating;

C) An afterburner is installed and operated so that VOM emissions (excluding methane and ethane) from the press dryer exhaust(s) are reduced as follows

i) Prior to May 1, 2010, by 90 percent, by weight, or to a maximum afterburner exhaust outlet concentration of 20 ppmv (as carbon); and

ii) On and after May 1, 2010, by at least 90 percent, by weight, for afterburners first constructed at the source prior to January 1, 2010; by at least 95 percent, by weight, for afterburners first constructed at the source on or after January 1, 2010; or to a maximum afterburner exhaust outlet concentration of 20 ppmv (as carbon);
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D) The afterburner complies with all monitoring provisions specified in Section 218.410(c) of this Subpart is equipped with the applicable monitoring equipment specified in Section 218.105(d)(2) of this Part and the monitoring equipment is installed, calibrated, operated, and maintained according to manufacturer's specifications at all times when the afterburner is in use; and

E) The afterburner is operated at all times when the printing line is in operation, except the afterburner may be shut down between November 1 and April 1 as provided in Section 218.107 of this Part;

2) Cause or allow the operation of any non-heatset web offset lithographic printing line unless the VOM content of the as-applied fountain solution is 5 percent or less, by weight, and the as-applied fountain solution contains no alcohol;

3) Cause or allow the operation of any sheet-fed offset lithographic printing line unless:

   A) The VOM content of the as-applied fountain solution is 5 percent or less, by weight; or

   B) The VOM content of the as-applied fountain solution is 8.5 percent or less, by weight, and the temperature of the fountain solution is maintained below 15.6° C (60° F), measured at the reservoir or the fountain tray;

4) Cause or allow the use of a cleaning solution on any lithographic printing line unless:

   A) The VOM content of the as-used cleaning solution is less than or equal to:

      i) 30 percent, by weight; or
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ii) On and after May 1, 2010, for owners or operators of sources that meet the applicability criteria in Section 218.405(c)(3) and do not certify pursuant to Section 218.411(g)(1)(B) that the source will not make use of any of the exclusions in Section 218.405(c)(3), 70 percent, by weight; or

B) The VOM composite partial vapor pressure of the as-used cleaning solution is less than 10 mmHg at 20° C (68° F);

5) Cause or allow VOM containing cleaning materials, including used cleaning towels, associated with any lithographic printing line to be kept, stored or disposed of in any manner other than in closed containers, except when specifically in use.

b) An owner or operator of a heatset web offset lithographic printing line subject to the requirements of subsection (a)(1)(C) of this Section may use a control device other than an afterburner, if:

1) The control device reduces VOM emissions from the press dryer exhausts as follows

A) Prior to May 1, 2010, by at least 90 percent, by weight, or to a maximum control device exhaust outlet concentration of 20 ppmv (as carbon); and

B) On and after May 1, 2010:

i) By at least 90 percent, by weight, for control devices first constructed at the source prior to January 1, 2010;

ii) By at least 95 percent, by weight, for control devices first constructed at the source on or after January 1, 2010; or

iii) To a maximum control device exhaust outlet concentration of 20 ppmv (as carbon);

2) The owner or operator submits a plan to the Agency detailing appropriate monitoring devices, test methods, recordkeeping requirements, and
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operating parameters for the control device; and

3) The use of the control device with testing, monitoring, and recordkeeping in accordance with this plan is approved by the Agency and USEPA as federally enforceable permit conditions.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 218.408 Compliance Schedule for Lithographic Printing On and After March 15, 1996 (Repealed)

a) Every owner or operator of a lithographic printing line subject to one or more of the control requirements of Section 218.407 of this Subpart shall comply with the applicable requirements of Sections 218.407 through 218.411 of this Subpart on and after March 15, 1996, or upon initial start-up, whichever is later.

b) No owner or operator of a lithographic printing line which is exempt from the limitations of Section 218.407 of this Subpart because of the criteria in Section 218.405(d) of this Subpart, shall operate said printing line on or after March 15, 1996, unless the owner or operator has complied with, and continues to comply with, Sections 218.405(d) and 218.411(a) of this Subpart.

(Source: Repealed at 34 Ill. Reg. ______, effective ____________)

Section 218.409 Testing for Lithographic Printing On and After March 15, 1996

a) Testing to demonstrate compliance with the requirements of Section 218.407 of this Subpart shall be conducted by the owner or operator within 90 days after a request by the Agency, or as otherwise specified in this Subpart. Such testing shall be conducted at the expense of the owner or operator and the owner or operator shall notify the Agency in writing 30 days in advance of conducting such testing to allow the Agency to be present during such testing.

b) The methods and procedures of Section 218.105(d) and (f) shall be used for testing to demonstrate compliance with the requirements of Section 218.407(a)(1)(C) or (b)(1) of this Subpart, as follows:

1) To select the sampling sites, Method 1 or 1A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference at Section 218.112 of this Part.
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The sampling sites for determining efficiency in reducing VOM from the dryer exhaust shall be located between the dryer exhaust and the control device inlet, and between the outlet of the control device and the exhaust to the atmosphere;

2) To determine the volumetric flow rate of the exhaust stream, Method 2, 2A, 2C, or 2D, as appropriate, 40 CFR 60, Appendix A, incorporated by reference at Section 218.112 of this Part;

3) To determine the VOM concentration of the exhaust stream entering and exiting the control device, Method 25 or 25A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference at Section 218.112 of this Part. For thermal and catalytic afterburners, Method 25 must be used except under the following circumstances, in which case Method 25A must be used:

   A) The allowable outlet concentration of VOM from the control device is less than 50 ppmv, as carbon;

   B) The VOM concentration at the inlet of the control device and the required level of control result in exhaust concentrations of VOM of 50 ppmv, or less, as carbon; and

   C) Due to the high efficiency of the control device, the anticipated VOM concentration at the control device exhaust is 50 ppmv or less, as carbon, regardless of inlet concentration. If the source elects to use Method 25A under this option, the exhaust VOM concentration must be 50 ppmv or less, as carbon, and the required destruction efficiency must be met for the source to have demonstrated compliance. If the Method 25A test results show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, a retest is required. The retest shall be conducted using either Method 25 or Method 25A. If the retest is conducted using Method 25A and the test results again show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, the source must retest using Method 25;

4) Notwithstanding the criteria or requirements in Method 25
specifies a minimum probe temperature of 129°C (265°F), the probe must be heated to at least the gas stream temperature of the dryer exhaust, typically close to 176.7°C (350°F);

5) During testing, the printing lines shall be operated at representative operating conditions and flow rates; and

6) During testing, an air flow direction indicating device, such as a smoke stick, shall be used to demonstrate 100 percent emissions capture efficiency for the dryer in accordance with Section 218.407(a)(1)(B) of this Subpart.

c) Testing to demonstrate compliance with the VOM content limitations in Section 218.407(a)(1)(A), (a)(2), (a)(3) and (a)(4)(A) of this Subpart, and to determine the VOM content of fountain solutions, fountain solution additives, cleaning solvents, cleaning solutions, and inks (pursuant to the requirements of Section 218.411(a)(1)(B), (b)(1)(B), or (b)(2)(B) of this Subpart, as applicable, shall be conducted upon request of the Agency or as otherwise specified in this Subpart, as follows:

1) The applicable test methods and procedures specified in Section 218.105(a) of this Part shall be used; provided, however, Method 24, incorporated by reference at Section 218.112 of this Part, shall be used to demonstrate compliance; or

2) The manufacturer's specifications for VOM content for fountain solution additives, cleaning solvents, and inks may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 218.105(a) of this Part; provided, however, Method 24 shall be used to determine compliance.

d) Testing to demonstrate compliance with the requirements of Section 218.407(b) of this Subpart shall be conducted as set forth in the owner or operator's plan approved by the Agency and USEPA as federally enforceable permit conditions pursuant to Section 218.407(b) of this Subpart.

e) Testing to determine the VOM composite partial vapor pressure of cleaning solvents, cleaning solvent concentrates, and as-used cleaning solutions shall be conducted in accordance with the applicable methods and procedures specified in
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Section 218.110 of this Part.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 218.410 Monitoring Requirements for Lithographic Printing

a) Fountain Solution Temperature.

  1) The owner or operator of any lithographic printing lines relying on the temperature of the fountain solution to demonstrate compliance shall install, maintain, and continuously operate a temperature monitor of the fountain solution in the reservoir or fountain tray, as applicable.

  2) The temperature monitor must be capable of reading with an accuracy of 1° C or 2° C, and must be attached to an automatic, continuous recording device such as a strip chart, recorder, or computer, with at least the same accuracy, that is installed, calibrated and maintained in accordance with the manufacturer’s specifications. If the automatic, continuous recording device malfunctions, the owner or operator shall record the temperature of the fountain solution at least once every two operating hours. The automatic, continuous recording device shall be repaired or replaced as soon as practicable.

b) Fountain Solution VOM Content. The owner or operator of any lithographic printing lines subject to Section 218.407(a)(1)(A), (a)(2) or (a)(3) of this Subpart shall:

  1) For a fountain solution to which VOM is not added automatically:

     A) Maintain records of the VOM content of the fountain solution in accordance with Section 218.411(ge)(2)(C); or

     B) Take a sample of the as-applied fountain solution from the fountain tray or reservoir, as applicable, each time a fresh batch of fountain solution is prepared or each time VOM is added to an existing batch of fountain solution in the fountain tray or reservoir, and shall determine compliance with the VOM content limitation of the as-applied fountain solution by using one of the following options:
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i)  With a refractometer or hydrometer with a visual, analog, or digital readout and with an accuracy of 0.5 percent. The refractometer or hydrometer must be calibrated with a standard solution for the type of VOM used in the fountain solution, in accordance with manufacturer's specifications, against measurements performed to determine compliance. The refractometer or hydrometer must be corrected for temperature at least once per 8-hour shift or once per batch of fountain solution prepared or modified, whichever is longer; or

ii) With a conductivity meter if it is demonstrated that a refractometer and hydrometer cannot distinguish between compliant and noncompliant fountain solution for the type and amount of VOM in the fountain solution. A source may use a conductivity meter if it demonstrates that both hydrometers and refractometers fail to provide significantly different measurements for standard solutions containing 95 percent, 100 percent and 105 percent of the applicable VOM content limit. The conductivity meter reading for the fountain solution must be referenced to the conductivity of the incoming water. A standard solution shall be used to calibrate the conductivity meter for the type of VOM used in the fountain solution, in accordance with manufacturer's specifications;

2) For fountain solutions to which VOM is added at the source with automatic feed equipment, determine the VOM content of the as-applied fountain solution based on the setting of the automatic feed equipment which makes additions of VOM up to a pre-set level. Records must be retained of the VOM content of the fountain solution in accordance with Section 218.411(ee)(2)(D) of this Subpart. The equipment used to make automatic additions must be installed, calibrated, operated and maintained in accordance with manufacturer's specifications.

c) Afterburners For Heatset Web Offset Lithographic Printing Lines. If an afterburner is used to demonstrate compliance, the owner or operator of a heatset web offset lithographic printing line subject to Section 218.407(a)(1)(C) of this Subpart shall:
1) Install, calibrate, maintain, and operate temperature monitoring devices with an accuracy of 3° C or 5° F on the afterburner in accordance with Section 218.105(d)(2) of this Part and in accordance with the manufacturer's specifications. Monitoring shall be performed at all times when the afterburner is operating; and

2) Install, calibrate, operate and maintain, in accordance with manufacturer's specifications, a continuous recorder on the temperature monitoring devices, such as a strip chart, recorder or computer, with at least the same accuracy as the temperature monitor.

d) Other Control Devices for Heatset Web Offset Lithographic Printing Lines. If a control device other than an afterburner is used to demonstrate compliance, the owner or operator of a heatset web offset lithographic printing line subject to this Subpart shall install, maintain, calibrate and operate such monitoring equipment as set forth in the owner or operator's plan approved by the Agency and USEPA pursuant to Section 218.407(b) of this Subpart.

e) Cleaning Solution

1) The owner or operator of any lithographic printing line relying on the VOM content of the cleaning solution to comply with Section 218.407(a)(4)(A) of this Subpart must:

   A) For cleaning solutions that are prepared at the source with equipment that automatically mixes cleaning solvent and water (or other non-VOM):

      i) Install, operate, maintain, and calibrate the automatic feed equipment in accordance with manufacturer's specifications to regulate the volume of each of the cleaning solvent and water (or other non-VOM), as mixed; and

      ii) Pre-set the automatic feed equipment so that the consumption rates of the cleaning solvent and water (or other non-VOM), as applied, comply with Section 218.407(a)(4)(A) of this Subpart;
B) For cleaning solutions that are not prepared at the source with automatic feed equipment, keep records of the usage of cleaning solvent and water (or other non-VOM) as set forth in Section 218.411(fd)(2) of this Subpart.

2) The owner or operator of any lithographic printing line relying on the vapor pressure of the cleaning solution to comply with Section 218.407(a)(4)(B) of this Subpart must keep records for such cleaning solutions used on any such line(s) as set forth in Section 218.411(fd)(2)(C) of this Subpart.

(Source: Amended at 34 Ill. Reg. ______, effective __________)

Section 218.411 Recordkeeping and Reporting for Lithographic Printing

a) Exempt units prior to May 1, 2010. An owner or operator of lithographic printing line(s) exempt from the limitations of Section 218.407 of this Subpart prior to May 1, 2010, because of the criteria in Section 218.405(bd) of this Subpart, shall comply with the following:

1) Upon initial start-up of a new lithographic printing line, and upon modification of a lithographic printing line, submit a certification to the Agency that includes:

A) A declaration that the source is exempt from the control requirements in Section 218.407 of this Part because of the criteria in Section 218.405(bd) of this Subpart;

B) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source never exceed 45.5 kg/day (100 lbs/day) before the use of capture systems and control devices, as follows:

i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM from all lithographic printing lines at the source (including
solvents used for cleanup operations associated with the lithographic printing lines) and divide this amount by the number of days during that calendar month that lithographic printing lines at the source were in operation;

ii) To determine the VOM content of the inks, fountain solution additives and cleaning solvents, the tests methods and procedures set forth in Section 218.409(c) of this Subpart shall be used;

iii) To determine VOM emissions from inks used on lithographic printing lines at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines; and

iv) To determine VOM emissions from fountain solutions and cleaning solvents used on lithographic printing lines at the source, no retention factor is used;

C) Either a declaration that the source, through federally enforceable permit conditions, has limited its maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with heatset web offset printing lines) at the source to no more than 90.7 Mg (100 tons) per calendar year before the application of capture systems and control devices or calculations which demonstrate that the source’s total maximum theoretical emissions of VOM do not exceed 90.7 Mg/yr (100 TPY). Total maximum theoretical emissions of VOM for a heatset web offset lithographic printing source is the sum of maximum theoretical emissions of VOM from
each heatset web offset lithographic printing line at the source. The following equation shall be used to calculate total maximum theoretical emissions of VOM per calendar year in the absence of air pollution control equipment for each heatset web offset lithographic printing line at the source: To determine the source’s total maximum theoretical emissions for the purposes of this subsection, the owner or operator shall use the calculations set forth in Section 218.406(b)(1)(A)(ii) of this Subpart, and

\[ E_p = (R \times A \times B) + (C \times D) + 1095 (F \times G \times H) \]

where:

\[ E_p = \text{Total maximum theoretical emissions of VOM from one heatset web offset printing line in units of kg/yr (lb/yr)}; \]

\[ A = \text{Weight of VOM per volume of solids of ink with the highest VOM content as applied each year on the printing line in units of kg/l (lb/gal) of solids}; \]

\[ B = \text{Total volume of solids for all inks that can potentially be applied each year on the printing line in units of 1/yr (gal/yr). The method by which the owner or operator accurately calculated the volume of each ink as applied and the amount that can potentially be applied each year on the printing line shall be described in the certification to the Agency}; \]

\[ C = \text{Weight of VOM per volume of fountain solution with the highest VOM content as applied each year on the printing line in units of kg/l (lb/gal)}; \]

\[ D = \text{The total volume of fountain solution that can potentially be used each year on the printing line in units of 1/yr (gal/yr). The method by which the owner or operator accurately calculated the volume of each fountain solution used and the amount that can potentially be used each year on the printing line shall be described in the certification to the Agency}; \]

\[ F = \text{Weight of VOM per volume of material for the cleanup material or} \]
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solvent with the highest VOM content as used each year on the printing line in units of kg/l (lb/gal) of such material;

\begin{align*}
G &= \text{The greatest volume of cleanup material or solvent used in any 8-hour period;} \\
H &= \text{The highest fraction of cleanup material or solvent that is not recycled or recovered for offsite disposal during any 8-hour period;} \\
R &= \text{The multiplier representing the amount of VOM not retained in the substrate being used. For paper, } R = 0.8. \text{ For metal, plastic, or other impervious substrates, } R = 1.0;
\end{align*}

D) A description and the results of all tests used to determine the VOM content of inks, fountain solution additives, and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 218.409(c)(1) of this Subpart;

2) Notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs. Such notification shall include a copy of all records of such event.

b) Exempt units on and after May 1, 2010.

1) Lithographic printing lines exempt pursuant to Section 218.405(c)(2). By May 1, 2010, or upon initial start-up of a new lithographic printing line, whichever is later, and upon modification of a lithographic printing line, an owner or operator of lithographic printing lines exempt from the limitations in Section 218.407 of this Subpart because of the criteria in Section 218.405(c)(2) of this Subpart shall submit a certification to the Agency that includes the information specified in either subsections (b)(1)(A), (b)(1)(B), and (b)(1)(D) of this Section or subsections (b)(1)(A) and (b)(1)(C) of this Section, as applicable. An owner or operator complying with subsection (b)(1)(B) shall also comply with the requirements in subsection (b)(1)(E) of this Section. An owner or operator
complying with subsection (b)(1)(C) shall also comply with the requirements in subsection (b)(1)(F) of this Section:

A) A declaration that the source is exempt from the requirements in Section 218.407 of this Part because of the criteria in Section 218.405(c)(2) of this Subpart;

B) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source do not equal or exceed 6.8 kg/day (15 lbs/day), before the use of capture systems and control devices, as follows:

i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) and divide this amount by the number of days during that calendar month that lithographic printing lines at the source were in operation;

ii) To determine the VOM content of the inks, fountain solution additives and cleaning solvents, the test methods and procedures set forth in Section 218.409(c) of this Subpart shall be used;

iii) To determine VOM emissions from inks used on lithographic printing lines at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines; and
iv) To determine VOM emissions from cleaning solutions used on lithographic printing lines at the source, an emission adjustment factor of 0.50 shall be used in calculating emissions from used shop towels if the VOM composite vapor pressure of each associated cleaning solution is less than 10 mmHg measured at 20°C (68°F) and the shop towels are kept in closed containers. For cleaning solutions with VOM composite vapor pressures of equal to or greater than 10 mmHg measured at 20°C (68°F) and for shop towels that are not kept in closed containers, no emission adjustment factor is used.

C) As an alternative to the calculations in subsection (b)(1)(B), a statement that the source uses less than the amount of material specified in subsection (b)(1)(C)(i) or (ii), as applicable, during each calendar month. A source may determine that it emits below 6.8 kg/day (15 lbs/day) of VOM based upon compliance with such material use limitations. If the source exceeds this amount of material use in a given calendar month, the owner or operator must, within 15 days after the end of that month, complete the emissions calculations of subsection (b)(1)(B) to determine daily emissions for applicability purposes. If the source ever exceeds this amount of material use for six consecutive calendar months, it is no longer eligible to use this subsection (b)(1)(C) as an alternative to the calculations in subsection (b)(1)(B). If a source has both heatset web offset and either nonheatset web offset or sheetfed lithographic printing operations, or has all three types of printing operations, the owner or operator may not make use of this alternative and must use the calculations in subsection (b)(1)(B).

i) The sum of all sheetfed and nonheatset web offset lithographic printing operations at the source: 242.3 liters (64 gallons) of cleaning solvent and fountain solution additives, combined; or

ii) The sum of all heatset web offset lithographic printing operations at the source: 204.1 kg (450 lbs) of ink, cleaning solvent, and fountain solution additives, combined;
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D) A description and the results of all tests used to determine the VOM content of inks, fountain solution additives, and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 218.409(c)(1) of this Subpart;

E) For sources complying with subsection (b)(1)(B) of this Section, notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever equal or exceed 6.8 kg/day (15 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs. If such emissions of VOM at the source equal or exceed 6.8 kg/day (15 lbs/day) but do not exceed 45.5 kg/day (100 lbs/day), the source shall comply with the requirements in subsection (b)(2) of this Section;

F) For sources complying with subsection (b)(1)(C) of this Section, comply with the following:

i) Maintain material use records showing that the source uses less than the amount of material specified in subsections (b)(1)(C)(i) and (b)(1)(C)(ii) during each calendar month, or, if the source exceeds the material use limitations, records showing that the source exceeded the limitations but did not emit 6.8 kg/day (15 lbs/day) or more of VOM;

ii) Notify the Agency in writing if the source exceeds the material use limitations for six consecutive calendar months, or if the source changes its method of compliance from subsection (b)(1)(C) to subsection (b)(1)(B) of this Section, within 30 days after the event occurs;

2) Heatset web offset lithographic printing lines exempt pursuant to Section 218.405(c)(1) but not exempt pursuant to Section 218.405(c)(2). By May 1, 2010, or upon initial start-up of a new heatset web offset lithographic printing line, whichever is later, and upon modification of a heatset web
offset lithographic printing line, an owner or operator of heatset web offset lithographic printing lines that are exempt from the limitations in Section 218.407 of this Subpart pursuant to the criteria in Section 218.405(c)(1) of this Subpart, but that are not exempt pursuant to the criteria in Section 218.405(c)(2) of this Subpart, shall submit a certification to the Agency that includes the information specified in subsections (b)(2)(A) through (b)(2)(C) of this Section. Such owner or operator shall also comply with the requirements in subsection (b)(2)(D) of this Section:

A) A declaration that the source is exempt from the control requirements in Section 218.407 of this Part because of the criteria in Section 218.405(c)(1) of this Subpart, but is not exempt pursuant to the criteria in Section 218.405(c)(2) of this Subpart;

B) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source never exceed 45.5 kg/day (100 lbs/day) before the use of capture systems and control devices, as follows (the following methodology shall also be used to calculate whether a source exceeds 45.5 kg/day (100 lbs/day) for purposes of determining eligibility for the exclusions set forth in Section 218.415(c)(3), in accordance with Sections 218.411(g)(2)(A)(i):

i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) and divide this amount by the number of days during that calendar month that lithographic printing lines at the source were in operation;

ii) To determine the VOM content of the inks, fountain solution additives and cleaning solvents, the test methods and procedures set forth in Section 218.409(c) of this Subpart shall be used;
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iii) To determine VOM emissions from inks used on lithographic printing lines at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines;

iv) To determine VOM emissions from cleaning solvents used on lithographic printing lines at the source, an emission adjustment factor of 0.50 shall be used in calculating emissions from cleaning solution in shop towels if the VOM composite vapor pressure of such cleaning solution is less than 10 mmHg measured at 20°C (68°F) and the shop towels are kept in closed containers. For cleaning solutions with VOM composite vapor pressures of equal to or greater than 10 mmHg measured at 20°C (68°F) and for shop towels that are not kept in closed containers, no emission adjustment factor is used;

C) A description and the results of all tests used to determine the VOM content of inks, fountain solution additives, and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 218.409(c)(1) of this Subpart;

D) Notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations
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associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs.

(2) Unless complying with subsections (b)(1)(C) and (b)(1)(F) of this Section, an owner or operator of lithographic printing lines subject to the requirements of subsection (a) or (b) of this Section shall, on and after March 15, 1996, collect and record either the information specified in subsection (c)(1) or (c)(2)(a)(2)(A) or (a)(2)(B) of this Section for all lithographic printing lines at the source:

1A) Standard recordkeeping, including the following:

Aii) The name and identification of each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line, recorded each month;

Biii) A daily record which shows whether a lithographic printing line at the source was in operation on that day;

Ciii) The VOM content and the volume of each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line, recorded each month;

Diii) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each fountain solution additive, cleaning solvent, and lithographic ink (with the applicable ink VOM emission adjustment) used at the source, calculated each month; and

Fiv) The VOM emissions in lbs/day for the month, calculated in accordance with Section 218.411(a)(1)(B), 218.411(b)(1)(B), or 218.411(b)(2)(B) of this Subpart, as applicable;

2B) Purchase and inventory recordkeeping, including the following:

Aii) The name, identification, and VOM content of each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line, recorded each month;
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Bii) Inventory records from the beginning and end of each month indicating the total volume of each fountain solution additive, lithographic ink, and cleaning solvent to be used on any lithographic printing line at the source;

Ciit) Monthly purchase records for each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line at the source;

Div) A daily record which shows whether a lithographic printing line at the source was in operation on that day;

Eiv) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each fountain solution additive, cleaning solvent, and lithographic ink (with the applicable ink VOM emission adjustment) used at the source, calculated each month based on the monthly inventory and purchase records required to be maintained pursuant to subsections (c)(2)(A), (c)(2)(B), and (c)(2)(C)(a)(2)(B)(i), (a)(2)(B)(ii) and (a)(2)(B)(iii) of this Section; and

Fvi) The VOM emissions in lbs/day for the month, calculated in accordance with Section 218.411(a)(1)(B), 218.411(b)(1)(B), or 218.411(b)(2)(B) of this Subpart, as applicable.

3) On and after March 15, 1996, notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs. Such notification shall include a copy of all records of such event.

db) An owner or operator of a heatset web offset lithographic printing line(s) subject to the control requirements of Section 218.407(a)(1)(C) or (b)(1) of this Subpart shall comply with the following:

1) By May 1, 2010, upon initial start-up of a new printing
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line, and upon initial start-up of a new control device for a heatset web offset printing line, submit a certification to the Agency that includes the following:

A) An identification of each heatset web offset lithographic printing line at the source;

B) A declaration that each heatset web offset lithographic printing line is in compliance with the requirements of Section 218.407(a)(1)(B), (a)(1)(C), (a)(1)(D) and (a)(1)(E) or (b) of this Subpart, as appropriate;

C) The type of afterburner or other approved control device used to comply with the requirements of Section 218.407(a)(1)(C) or (b)(1) of this Subpart and the date that such device was first constructed at the source;

D) The control requirements in Section 218.407(a)(1)(C) or (b)(1) of this Subpart with which the lithographic printing line is complying;

E) The results of all tests and calculations necessary to demonstrate compliance with the control requirements of Section 218.407(a)(1)(C) or (b)(1) of this Subpart, as applicable; and

F) A declaration that the monitoring equipment required under Section 218.407(a)(1)(D) or (b) of this Subpart, as applicable, has been properly installed and calibrated according to manufacturer's specifications;

2) If testing of the afterburner or other approved control device is conducted pursuant to Section 218.409(b) of this Subpart, the owner or operator shall, within 90 days after conducting such testing, submit a copy of all test results to the Agency and shall submit a certification to the Agency that includes the following:

A) A declaration that all tests and calculations necessary to demonstrate whether the lithographic printing line(s) is in compliance with Section 218.407(a)(1)(C) or (b)(1) of this Subpart, as applicable, have been properly performed;
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3) Except as provided in subsection (d)(3)(D)(ii) of this Section. On and after March 15, 1996, collect and record daily the following information for each heatset web offset lithographic printing line subject to the requirements of Section 218.407(a)(1)(C) or (b)(1) of this Subpart:

A) Afterburner or other approved control device monitoring data in accordance with Section 218.410(c) or (d) of this Subpart, as applicable;

B) A log of operating time for the afterburner or other approved control device, monitoring equipment, and the associated printing line;

C) A maintenance log for the afterburner or other approved control device and monitoring equipment detailing all routine and non-routine maintenance performed, including dates and duration of any outages; and

D) A log detailing checks on the air flow direction or air pressure of the dryer and press room to ensure compliance with the requirements of Section 218.407(a)(1)(B) of this Subpart as follows:

i) Prior to May 1, 2010, at least once per 24-hour period while the line is operating; and

ii) On and after May 1, 2010, at least once per calendar month while the line is operating

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violation of Section 218.407(a)(1)(C) or (b)(1) of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation;

5) If changing its method of compliance between subsections (a)(1)(C) and (b) of Section 218.407 of this Subpart, certify compliance for the new method of compliance in accordance with subsection (b)(1) of this Section at least 30 days before making such change, and perform all tests and calculations necessary to demonstrate that such printing lines will be in compliance with the requirements of Section 218.407(a)(1)(B), (a)(1)(C), (a)(1)(D) and (a)(1)(E) of this Subpart, or Section 218.407(b) of this Subpart, as applicable.

An owner or operator of a lithographic printing line subject to Section 218.407(a)(1)(A), (a)(2), or (a)(3) of this Subpart, shall:

1) By May 1, 2010, and upon initial start-up of a new lithographic printing line, certify to the Agency that fountain solutions used on each lithographic printing line will be in compliance with the applicable VOM content limitation. Such certification shall include:

A) Identification of each lithographic printing line at the source, by type, e.g., heatset web offset, non-heatset web offset, or sheet-fed offset;

B) Identification of each centralized fountain solution reservoir and each lithographic printing line that it serves;

C) A statement that the fountain solution will comply with the VOM content limitations in Section 218.407(a)(1)(A), (a)(2), or (a)(3), as applicable; The VOM content limitation with which each fountain solution will comply;

D) Initial documentation that each type of fountain solution will comply with the applicable VOM content limitations, including copies of manufacturer's specifications, test results, if any, formulation data and calculations;

E) Identification of the method that will be used to
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demonstrate continuing compliance with the applicable limitation, e.g., a refractometer, hydrometer, conductivity meter, or recordkeeping procedures with detailed description of the compliance methodology; and

F) A sample of the records that will be kept pursuant to Section 218.411(ge)(2) of this Subpart.

2) Collect on and after March 15, 1996, and record the following information for each fountain solution:

A) The name and identification of each batch of fountain solution prepared for use on one or more lithographic printing lines, the lithographic printing line(s) or centralized reservoir using such batch of fountain solution, and the applicable VOM content limitation for the batch;

B) If an owner or operator uses a hydrometer, refractometer, or conductivity meter, pursuant to Section 218.410(b)(1)(B), to demonstrate compliance with the applicable VOM content limit in Section 218.407(a)(1)(A), (a)(2), or (a)(3) of this Subpart:

i) The date and time of preparation, and each subsequent modification, of the batch;

ii) The results of each measurement taken in accordance with Section 218.410(b) of this Subpart;

iii) Documentation of the periodic calibration of the meter in accordance with the manufacturer’s specifications, including date and time of calibration, personnel conducting, identity of standard solution, and resultant reading; and

iv) Documentation of the periodic temperature adjustment of the meter, including date and time of adjustment, personnel conducting and results;

C) If the VOM content of the fountain solution is determined pursuant
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to Section 218.410(b)(1)(A) of this Subpart, for each batch of as-applied fountain solution:

i) Date and time of preparation and each subsequent modification of the batch;

ii) Volume or weight, as applicable, and VOM content of each component used in, or subsequently added to, the fountain solution batch;

iii) Calculated VOM content of the as-applied fountain solution; and

iv) Any other information necessary to demonstrate compliance with the applicable VOM content limits in Section 218.407(a)(1)(A), (a)(2) and (a)(3) of this Subpart, as specified in the source's operating permit;

D) If the VOM content of the fountain solution is determined pursuant to Section 218.410(b)(2) of this Subpart, for each setting:

i) VOM content limit corresponding to each setting;

ii) Date and time of initial setting and each subsequent setting;

iii) Documentation of the periodic calibration of the automatic feed equipment in accordance with the manufacturer's specifications; and

iv) Any other information necessary to demonstrate compliance with the applicable VOM content limits in Sections 218.407(a)(1)(A), (a)(2) and (a)(3) of this Subpart, as specified in the source's operating permit;

E) If the owner or operator relies on the temperature of the fountain solution to comply with the requirements in Section 218.407(a)(1)(A)(ii) or (a)(3)(B) of this Subpart:

i) The temperature of the fountain solution at each printing
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line, as monitored in accordance with Section 218.410(a); and

ii) A maintenance log for the temperature monitoring devices and automatic, continuous temperature recorders detailing all routine and non-routine maintenance performed, including dates and duration of any outages;

3) Notify the Agency in writing of any violation of Section 218.407 of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation;

4) If changing its method of demonstrating compliance with the applicable VOM content limitations in Section 218.407 of this Subpart, or changing the method of demonstrating compliance with the VOM content limitations for fountain solutions pursuant to Section 218.409 of this Subpart, certify compliance for such new method(s) in accordance with subsection (c)(1) of this Section within 30 days after making such change, and perform all tests and calculations necessary to demonstrate that such printing line(s) will be in compliance with the applicable requirements of Section 218.407 of this Subpart.

For lithographic printing line cleaning operations, an owner or operator of a lithographic printing line subject to the requirements of Section 218.407 of this Subpart shall:

1) By May 1, 2010, and upon initial start-up of a new lithographic printing line, certify to the Agency that all cleaning solutions, other than those excluded pursuant to Section 218.405(c)(3)(C), and the handling of all cleaning materials, will be in compliance with the requirements of Section 218.407(a)(4)(A) or (a)(4)(B) and (a)(5) of this Subpart, and such certification shall also include:

A) Identification of each VOM-containing cleaning solution used on each lithographic printing line;

AB) A statement that the cleaning solution will comply with the limitations in Section 218.407(a)(4); The limitation with which each VOM-containing cleaning solution will comply, i.e., the
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A) **VOM content or vapor pressure;**

C) **Initial documentation that each VOM-containing cleaning solution will comply with the applicable limitation, including copies of manufacturer's specifications, test results, if any, formulation data and calculations;**

BD) **Identification of the methods that will be used to demonstrate continuing compliance with the applicable limitations;**

CE) **A sample of the records that will be kept pursuant to Section 218.411(f)(2) of this Subpart; and**

DF) **A description of the practices that ensure that VOM-containing cleaning materials are kept in closed containers;**

2) **Collect and record the following information for each cleaning solution used on each lithographic printing line:**

A) **For each cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section 218.407(a)(4)(A) of this Subpart and that is prepared at the source with automatic equipment:**

i) The name and identification of each cleaning solution;

ii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 218.409(c) of this Subpart;

iii) Each change to the setting of the automatic equipment, with date, time, description of changes in the cleaning solution constituents (e.g., cleaning solvents), and a description of changes to the proportion of cleaning solvent and water (or other non-VOM);

iv) The proportion of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution;
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v) The VOM content of the as-used cleaning solution, with supporting calculations; and

vi) A calibration log for the automatic equipment, detailing periodic checks;

B) For each batch of cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section 218.407(a)(4)(A) of this Subpart, and which is not prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) Date and time of preparation, and each subsequent modification, of the batch;

iii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 218.409(c) of this Subpart;

iv) The total amount of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution; and

v) The VOM content of the as-used cleaning solution, with supporting calculations. For cleaning solutions that are used as purchased, the manufacturer’s specifications for VOM content may be used if such manufacturer’s specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 218.105(a) of this Part;

C) For each batch of cleaning solution for which the owner or operator relies on the vapor pressure of the cleaning solution to demonstrate compliance with Section 218.407(a)(4)(B) of this Subpart:

i) The name and identification of each cleaning solution;
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ii) Date and time of preparation, and each subsequent modification, of the batch;

iii) The molecular weight, density, and VOM composite partial vapor pressure of each cleaning solvent, as determined in accordance with Section 218.409(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer's specifications for VOM composite partial vapor pressure may be used if such manufacturer's specifications are based on results of tests conducted in accordance with methods specified in Sections 218.105(a) and 218.110 of this Part;

iv) The total amount of each cleaning solvent used to prepare the as-used cleaning solution; and

v) The VOM composite partial vapor pressure of each as-used cleaning solution, as determined in accordance with Section 218.409(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer's specifications for VOM composite partial vapor pressure may be used if such manufacturer's specifications are based on results of tests conducted in accordance with methods specified in Sections 218.105(a) and 218.110 of this Part;

D) The date, time and duration of scheduled inspections performed to confirm the proper use of closed containers to control VOM emissions, and any instances of improper use of closed containers, with descriptions of actual practice and corrective action taken, if any;

3) NotifyOn and after March 15, 1996, notify the Agency in writing of any violation of Section 218.407 of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation;

4) If changing its method of demonstrating compliance with the requirements of Section 218.407(a)(4) of this Subpart, or changing between automatic
and manual methods of preparing cleaning solutions, certify compliance for such new method in accordance with subsection (d)(1) of this Section, within 30 days after making such change, and perform all tests and calculations necessary to demonstrate that such printing line(s) will be in compliance with the applicable requirements of Section 218.407(a)(4) of this Subpart.

g) The owner or operator of lithographic printing lines subject to one or more of the exclusions set forth in Section 218.405(c)(3) shall:

1) By May 1, 2010, or upon initial start-up of a new lithographic printing line that is subject to one or more of the exclusions set forth in Section 218.405(c)(3), whichever is later, submit a certification to the Agency that includes either:

A) A declaration that the source is subject to one or more of the exclusions set forth in Section 218.405(c)(3) and a statement indicating which such exclusions apply to the source; or

B) A declaration that the source will not make use of any of the exclusions set forth in Section 218.405(c)(3);

2) Unless the source has certified in accordance with subsection (g)(1)(B) of this Section that it will not make use of any of the exclusions set forth in Section 218.405(c)(3):

A) Collect and record the following information for all lithographic printing lines at the source:

i) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source never exceed 45.5 kg/day (100 lbs/day) before the use of capture systems and control devices, determined in accordance with the calculations in Section 218.411(b)(2)(B) of this Subpart;
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ii) The amount of cleaning materials used on lithographic printing lines at the source that does not comply with the cleaning material limitations in Section 218.407(a)(4) of this Subpart;

B) Notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs;

3) If changing from utilization of the exclusions set forth in Section 218.405(c)(3) to opting out of such exclusions pursuant to subsection (g)(1)(B) of this Section, or if there is a change at the source such that the exclusions no longer apply, certify compliance in accordance with subsection (g)(1)(B) of this Section within 30 days after making such change, and perform all tests and calculations necessary to demonstrate that such printing lines will be in compliance with the applicable requirements of Section 218.407 of this Subpart;

4) If changing from opting out of the exclusions set forth in Section 218.405(c)(3) pursuant to subsection (g)(1)(B) of this Section to utilization of such exclusions, certify compliance in accordance with subsection (g)(1)(A) of this Section within 30 days after making such change.

he) The owner or operator shall maintain all records required by this Section at the source for a minimum period of three years and shall make all records available to the Agency upon request.

i) Provisions for calculation of emissions from heatset web offset lithographic printing operations. To calculate VOM emissions from heatset web offset lithographic printing operations for purposes other than the applicability thresholds specified in Section 218.405 of this Subpart, sources may use the following emission adjustment factors (for Annual Emissions Reports or permit limits, for example):

1) A factor of 0.80 may be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an
impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines:

2) To determine VOM emissions from fountain solutions that contain no alcohol, an emission adjustment factor may be used to account for carryover into the dryer, except when using an impervious substrate. The VOM emitted from the fountain solution shall be calculated using the following equation:

\[ Vom_{fs} = 0.30 \times Vom_{tot} + (0.70 \times Vom_{tot}) = \times (1 - DE) \]

where:

\[ VOM_{tot} \] = Total VOM in the fountain solution;

\[ VOM_{fs} \] = VOM emitted from the fountain solution;

\[ DE \] = Destruction efficiency of the control device on the associated dryer, in decimal form (i.e., 95% control is represented as 0.95). If no control device is present, DE = 0;

For fountain solutions that contain alcohol, impervious substrates such as metal or plastic, or non-heatset lithographic presses, no emission adjustment factor is used:

3) To determine VOM emissions from cleaning solutions used on heatset web offset lithographic printing lines at the source, an emission adjustment factor of 0.50 may be used in calculating emissions from used shop towels if the VOM composite vapor pressure of each associated cleaning solution is less than 10 mmHg measured at 20°C (68°F) and the shop towels are kept in closed containers. To determine VOM emissions from automatic blanket wash solution with a VOM composite vapor pressure of less than 10 mmHg measured at 20°C (68°F), an emission adjustment factor may be used to account for carryover into the dryer, except when using an impervious substrate. The VOM emitted from the automatic blanket wash solution shall be calculated using the following equation.
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\[ V_{\text{om}_{\text{tot}}} = 0.60 \times V_{\text{om}_{\text{tot}}} + (0.40 \times V_{\text{om}_{\text{tot}}} \times (1 - DE)) \]

where:

\[ DE = \text{Destruction efficiency of the control device on the associated dryer, in decimal form (i.e., 95\% control is represented as 0.95).} \]

If no control device is present, \( DE = 0 \):

For cleaning solutions with VOM composite vapor pressures of equal to or greater than 10 mmHg measured at 20°C (68°F), for shop towels that are not kept in closed containers, and for impervious substrates such as metal or plastic, no emission adjustment factor is used.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

**Section 218.412 Letterpress Printing Lines: Applicability**

**a)** Except as provided in subsection (b) of this Section, on and after May 1, 2010, the limitations in Sections 218.413 through 218.416 of this Subpart shall apply to:

1) All heatset web letterpress printing lines at a source if all heatset web letterpress printing lines (including solvents used for cleanup operations associated with heatset web letterpress printing lines) at the source have a total potential to emit 22.7 Mg (25 tons) or more of VOM per year; and

2) All letterpress printing lines at a source where the combined emissions of VOM from all letterpress printing lines at the source (including solvents used for cleanup operations associated with the letterpress printing lines) ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, calculated in accordance with Section 218.417(b)(1)(B).

**b)** Notwithstanding subsection (a) of this Section, the requirements of Section 218.413(a)(2) of this Subpart shall not apply to up to 416.3 liters (110 gallons) per year of cleaning materials used on letterpress printing lines at a subject source.
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c) On and after May 1, 2010, the recordkeeping and reporting requirements in Section 218.417 of this Subpart shall apply to all owners or operators of letterpress printing lines.

d) If a letterpress printing line at a source is or becomes subject to one or more of the limitations in Section 218.413 of this Subpart, the letterpress printing lines at the source are always subject to the applicable provisions of this Subpart.

(Source: Added at 34 Ill. Reg. ______, effective ______________)

Section 218.413 Emission Limitations and Control Requirements for Letterpress Printing Lines

a) No owner or operator of letterpress printing lines subject to the requirements of this Subpart shall:

1) Cause or allow the operation of any heatset web letterpress printing line that meets the applicability requirements of Section 218.412(a)(1) unless:

A) The air pressure in the dryer is maintained lower than the air pressure of the press room, such that air flow through all openings in the dryer, other than the exhaust, is into the dryer at all times when the printing line is operating;

B) An afterburner is installed and operated so that VOM emissions (excluding methane and ethane) from the press dryer exhausts are reduced as follows:

i) By 90 percent, by weight, for afterburners first constructed at the source prior to January 1, 2010;

ii) By 95 percent, by weight, for afterburners first constructed at the source on or after January 1, 2010; or

iii) To a maximum afterburner exhaust outlet concentration of 20 ppmv (as carbon);

C) The afterburner complies with all monitoring provisions specified in Section 218.416(a) of this Subpart; and
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D) The afterburner is operated at all times when the printing line is in operation, except the afterburner may be shut down between November 1 and April 1 as provided in Section 218.107 of this Part;

2) Cause or allow the use of a cleaning solution on any letterpress printing line unless:

A) The VOM content of the as-used cleaning solution is less than or equal to 70 percent, by weight; or

B) The VOM composite partial vapor pressure of the as-used cleaning solution is less than 10 mmHg at 20°C (68°F);

3) Cause or allow VOM-containing cleaning materials, including used cleaning towels, associated with any letterpress printing line to be kept, stored, or disposed of in any manner other than in closed containers, except when specifically in use.

b) An owner or operator of a heatset web letterpress printing line subject to the requirements of subsection (a)(1)(B) of this Section may use a control device other than an afterburner, if:

1) The control device reduces VOM emissions from the press dryer exhausts as follows:

A) By 90 percent, by weight, for control devices first constructed at the source prior to January 1, 2010;

B) By 95 percent, by weight, for control devices first constructed at the source on or after January 1, 2010; or

C) To a maximum control device exhaust outlet concentration of 20 ppmv (as carbon);

2) The owner or operator submits a plan to the Agency detailing appropriate monitoring devices, test methods, recordkeeping requirements, and operating parameters for the control device; and
3) The use of the control device in accordance with this plan is approved by the Agency and USEPA as federally enforceable permit conditions.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 218.415 Testing for Letterpress Printing Lines

a) Testing to demonstrate compliance with the requirements of Section 218.413 of this Subpart shall be conducted by the owner or operator within 90 days after a request by the Agency, or as otherwise specified in this Subpart. Such testing shall be conducted at the expense of the owner or operator, and the owner or operator shall notify the Agency in writing 30 days in advance of conducting such testing to allow the Agency to be present during such testing.

b) The methods and procedures of Section 218.105(d) and (f) shall be used for testing to demonstrate compliance with the requirements of Section 218.413(a)(1)(B) or (b)(1) of this Subpart, as follows:

1) To select the sampling sites, Method 1 or 1A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 218.112 of this Part. The sampling sites for determining efficiency in reducing VOM from the dryer exhaust shall be located between the dryer exhaust and the control device inlet, and between the outlet of the control device and the exhaust to the atmosphere;

2) To determine the volumetric flow rate of the exhaust stream, Method 2, 2A, 2C, or 2D, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 218.112 of this Part;

3) To determine the VOM concentration of the exhaust stream entering and exiting the control device, Method 25 or 25A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 218.112 of this Part. For thermal and catalytic afterburners, Method 25 must be used except under the following circumstances, in which case Method 25A must be used:

A) The allowable outlet concentration of VOM from the control device is less than 50 ppmv, as carbon;
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B) The VOM concentration at the inlet of the control device and the required level of control result in exhaust concentrations of VOM of 50 ppmv, or less, as carbon; and

C) Due to the high efficiency of the control device, the anticipated VOM concentration at the control device exhaust is 50 ppmv or less, as carbon, regardless of inlet concentration. If the source elects to use Method 25A under this option, the exhaust VOM concentration must be 50 ppmv or less, as carbon, and the required destruction efficiency must be met for the source to have demonstrated compliance. If the Method 25A test results show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, a retest is required. The retest shall be conducted using either Method 25 or Method 25A. If the retest is conducted using Method 25A and the test results again show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, the source must retest using Method 25:

4) Notwithstanding the criteria or requirements in Method 25 which specifies a minimum probe temperature of 129°C (265°F), the probe must be heated to at least the gas stream temperature of the dryer exhaust, typically close to 176.7°C (350°F);

5) During testing, the printing lines shall be operated at representative operating conditions and flow rates; and

6) During testing, an air flow direction indicating device, such as a smoke stick, shall be used to demonstrate 100 percent emissions capture efficiency for the dryer in accordance with Section 218.413(a)(1)(A) of this Subpart.

c) Testing to demonstrate compliance with the VOM content limitations in Section 218.413(a)(2)(A) of this Subpart, and to determine the VOM content of cleaning solvents, cleaning solutions, and inks (pursuant to the requirements of Section 218.417(b)(1)(B) of this Subpart), shall be conducted upon request of the Agency, or as otherwise specified in this Subpart, as follows:
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1) The applicable test methods and procedures specified in Section 218.105(a) of this Part shall be used; provided, however, Method 24, incorporated by reference in Section 218.112 of this Part, shall be used to demonstrate compliance; or

2) The manufacturer's specifications for VOM content for cleaning solvents and inks may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 218.105(a) of this Part; provided, however, Method 24 shall be used to determine compliance.

Testing to demonstrate compliance with the requirements of Section 218.413(b) of this Subpart shall be conducted as set forth in the owner or operator's plan approved by the Agency and USEPA as federally enforceable permit conditions pursuant to Section 218.413(b) of this Subpart.

Testing to determine the VOM composite partial vapor pressure of cleaning solvents, cleaning solvent concentrates, and as-used cleaning solutions shall be conducted in accordance with the applicable methods and procedures specified in Section 218.110 of this Part.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 218.416 Monitoring Requirements for Letterpress Printing Lines

a) Afterburners for heatset web letterpress printing lines. If an afterburner is used to demonstrate compliance, the owner or operator of a heatset web letterpress printing line subject to Section 218.413(a)(1)(B) of this Subpart shall:

1) Install, calibrate, maintain, and operate temperature monitoring devices with an accuracy of 3°C or 5°F on the afterburner in accordance with Section 218.105(d)(2) of this Part and in accordance with the manufacturer's specifications. Monitoring shall be performed at all times when the afterburner is operating; and

2) Install, calibrate, operate, and maintain, in accordance with manufacturer's specifications, a continuous recorder on the temperature monitoring devices, such as a strip chart, recorder or computer, with at least the same accuracy as the temperature monitor.
b) Other control devices for heatset web letterpress printing lines. If a control device other than an afterburner is used to demonstrate compliance, the owner or operator of a heatset web letterpress printing line subject to this Subpart shall install, maintain, calibrate, and operate such monitoring equipment as set forth in the owner or operator's plan approved by the Agency and USEPA pursuant to Section 218.413(b) of this Subpart.

c) Cleaning solution.

1) The owner or operator of any letterpress printing line relying on the VOM content of the cleaning solution to comply with Section 218.413(a)(2)(A) of this Subpart must:

A) For cleaning solutions that are prepared at the source with equipment that automatically mixes cleaning solvent and water (or other non-VOM):

i) Install, operate, maintain, and calibrate the automatic feed equipment in accordance with manufacturer's specifications to regulate the volume of each of the cleaning solvent and water (or other non-VOM), as mixed; and

ii) Pre-set the automatic feed equipment so that the consumption rates of the cleaning solvent and water (or other non-VOM), as applied, comply with Section 218.413(a)(2)(A) of this Subpart.

B) For cleaning solutions that are not prepared at the source with automatic feed equipment, keep records of the usage of cleaning solvent and water (or other non-VOM) as set forth in Section 218.417(c)(2) of this Subpart.

2) The owner or operator of any letterpress printing line relying on the vapor pressure of the cleaning solution to comply with Section 218.413(a)(2)(B) of this Subpart must keep records for such cleaning solutions used on any such lines as set forth in Section 218.417(e)(2)(C) of this Subpart.

(Source: Added at 34 Ill. Reg. ______, effective ____________)
Section 218.417 Recordkeeping and Reporting for Letterpress Printing Lines

a) By May 1, 2010, or upon initial start-up of a new heatset web letterpress printing line, whichever is later, and upon modification of a heatset web letterpress printing line, an owner or operator of a heatset web letterpress printing line exempt from any of the limitations of Section 218.413 of this Subpart because of the criteria in Section 218.412(a)(1) shall submit a certification to the Agency that includes:

1) A declaration that the source is exempt from the requirements in Section 218.413 of this Subpart because of the criteria in Section 218.412(a)(1) of this Subpart;

2) Calculations which demonstrate that the source's total potential to emit VOM does not equal or exceed 22.7 Mg (25 tons) per year.

b) An owner or operator of a letterpress printing line exempt from any of the limitations of Section 218.413 of this Subpart because of the criteria in Section 218.412(a)(2) shall:

1) By May 1, 2010, or upon initial start-up of a new letterpress printing line, whichever is later, and upon modification of a letterpress printing line, submit a certification to the Agency that includes the information specified in either subsections (b)(1)(A) through (b)(1)(C) of this Section, or subsections (b)(1)(A) and (b)(1)(D) of this Section, as applicable:

A) A declaration that the source is exempt from the control requirements in Section 218.413 of this Part because of the criteria in Section 218.412(a)(2) of this Subpart;

B) Calculations that demonstrate that combined emissions of VOM from all letterpress printing lines (including inks and solvents used for cleanup operations associated with the letterpress printing lines) at the source never equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, as follows:

i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM...
from all letterpress printing lines at the source (including solvents used for cleanup operations associated with the letterpress printing lines) and divide this amount by the number of days during that calendar month that letterpress printing lines at the source were in operation;

ii) To determine the VOM content of the inks and cleaning solvents, the tests methods and procedures set forth in Section 218.415(c) of this Subpart shall be used;

iii) To determine VOM emissions from inks used on letterpress printing lines at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines; and

iv) To determine VOM emissions from cleaning solutions used on letterpress printing lines at the source, an emission adjustment factor of 0.50 shall be used in calculating emissions from used shop towels if the VOM composite vapor pressure of each associated cleaning solution is less than 10 mmHg measured at 20° C (68° F) and the shop towels are kept in closed containers. Otherwise, no retention factor is used;

C) A description and the results of all tests used to determine the VOM content of inks and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 218.415(c)(1) of this Subpart;

D) As an alternative to the calculations in subsection (b)(1)(B), a statement that the source uses less than the amount of material
specified in subsections (b)(1)(D)(i) or (b)(1)(D)(ii), as applicable, during each calendar month. A source may determine that it emits below 6.8 kg/day (15 lbs/day) of VOM based upon compliance with such material use limitations. If the source exceeds this amount of material use in a given calendar month, the owner or operator must, within 15 days of the end of that month, complete the emissions calculations of subsection (b)(1)(B) to determine daily emissions for applicability purposes. If the source ever exceeds this amount of material use for six consecutive calendar months, it is no longer eligible to use this subsection as an alternative to the calculations in subsection (b)(1)(B).

i) The sum of all sheetfed and nonheatset web letterpress printing operations at the source: 242.3 liters (64 gallons) of cleaning solvent; or

ii) The sum of all heatset web letterpress printing operations at the source: 204.1 kg (450 lbs) of ink and cleaning solvent;

2) For sources complying with subsection (b)(1)(B) of this Section, notify the Agency in writing if the combined emissions of VOM from all letterpress printing lines (including inks and solvents used for cleanup operations associated with the letterpress printing lines) at the source ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, within 30 days after the event occurs;

3) For sources complying with subsection (b)(1)(D) of this Section, comply with the following:

A) Maintain material use records showing that the source uses less than the amount of material specified in subsections (b)(1)(D)(i) and (b)(1)(D)(ii) during each calendar month, or, if the source exceeds the material use limitations, records showing that the source exceeded the limitations but did not emit 6.8 kg/day (15 lbs/day) or more of VOM;

B) Notify the Agency in writing if the source exceeds the material use limitations for six consecutive calendar months, or if the source changes its method of compliance from subsection (b)(1)(D) to
substitution (b)(1)(B) of this Section, within 30 days after the event occurs.

c) Unless complying with subsection (b)(1)(D) and (b)(3) of this Section, on and after May 1, 2010, an owner or operator of a letterpress printing line subject to the requirements in subsections (a) or (b) of this Section shall collect and record either the information specified in subsection (c)(1) or (c)(2) of this Section for all letterpress printing lines at the source:

1) Standard recordkeeping, including the following:

A) The name and identification of each letterpress ink and cleaning solvent used on any letterpress printing line, recorded each month;

B) A daily record that shows whether a letterpress printing line at the source was in operation on that day;

C) The VOM content and the volume of each letterpress ink and cleaning solvent used on any letterpress printing line, recorded each month;

D) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each cleaning solvent and letterpress ink (with the applicable ink VOM emission adjustment) used at the source, calculated each month; and

E) The VOM emissions in lbs/day for the month, calculated in accordance with Section 218.417(b)(1)(B) of this Subpart;

2) Purchase and inventory recordkeeping, including the following:

A) The name, identification, and VOM content of each letterpress ink and cleaning solvent used on any letterpress printing line, recorded each month;

B) Inventory records from the beginning and end of each month indicating the total volume of each letterpress ink, and cleaning solvent to be used on any letterpress printing line at the source;
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C) Monthly purchase records for each letterpress ink and cleaning solvent used on any letterpress printing line at the source;

D) A daily record that shows whether a letterpress printing line at the source was in operation on that day;

E) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each cleaning solvent and letterpress ink (with the applicable ink VOM emission adjustment factor) used at the source, calculated each month based on the monthly inventory and purchase records required to be maintained pursuant to subsections (c)(2)(A), (c)(2)(B), and (c)(2)(C) of this Section; and

F) The VOM emissions in lbs/day for the month, calculated in accordance with Section 218.417(b)(1)(B) of this Subpart;

d) An owner or operator of a heatset web letterpress printing lines subject to the control requirements of Section 218.413(a)(1)(B) or (b)(1) of this Subpart shall comply with the following:

1) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, and upon initial start-up of a new control device for a heatset web printing line, submit a certification to the Agency that includes the following:

A) An identification of each heatset web letterpress printing line at the source;

B) A declaration that each heatset web letterpress printing line is in compliance with the requirements of Section 218.413 (a)(1) or (b) of this Subpart, as appropriate;

C) The type of afterburner or other approved control device used to comply with the requirements of Section 218.413(a)(1)(B) or (b)(1) of this Subpart, and the date that such device was first constructed at the subject source;
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D) The control requirements in Section 218.413(a)(1)(B) or (b)(1) of this Subpart with which the letterpress printing line is complying;

E) The results of all tests and calculations necessary to demonstrate compliance with the control requirements of Section 218.413(a)(1)(B) or (b)(1) of this Subpart, as applicable; and

F) A declaration that the monitoring equipment required under Section 218.413(a)(1)(C) or (b) of this Subpart, as applicable, has been properly installed and calibrated according to manufacturer's specifications;

2) If testing of the afterburner or other approved control device is conducted pursuant to Section 218.415(b) of this Subpart, the owner or operator shall, within 90 days after conducting such testing, submit a copy of all test results to the Agency and shall submit a certification to the Agency that includes the following:

A) A declaration that all tests and calculations necessary to demonstrate whether the letterpress printing lines is in compliance with Section 218.413(a)(1)(B) or (b)(1) of this Subpart, as applicable, have been properly performed;

B) A statement whether the heatset web letterpress printing lines is or is not in compliance with Section 218.413(a)(1)(B) or (b)(1) of this Subpart, as applicable; and

C) The operating parameters of the afterburner or other approved control device during testing, as monitored in accordance with Section 218.416(a) or (b) of this Subpart, as applicable;

3) Except as provided in subsection (d)(3)(D) of this Section, collect and record daily the following information for each heatset web letterpress printing line subject to the requirements of Section 218.413(a)(1)(B) or (b)(1) of this Subpart:

A) Afterburner or other approved control device monitoring data in accordance with Section 218.416(a) or (b) of this Subpart, as applicable;
B) A log of operating time for the afterburner or other approved control device, monitoring equipment, and the associated printing line;

C) A maintenance log for the afterburner or other approved control device and monitoring equipment detailing all routine and non-routine maintenance performed, including dates and duration of any outages; and

D) A log detailing checks on the air flow direction or air pressure of the dryer and press room to ensure compliance with the requirements of Section 218.413(a)(1)(A) of this Subpart at least once per calendar month while the line is operating;

4) Notify the Agency in writing of any violation of Section 218.413(a)(1)(B) or (b)(1) of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation;

5) If changing the method of compliance between Sections 218.413(a)(1)(B) and 218.413(b) of this Subpart, certify compliance for the new method of compliance in accordance with Section 218.413(b) at least 30 days before making such change, and perform all tests and calculations necessary to demonstrate that such printing lines will be in compliance with the requirements of Section 218.413(a)(1) of this Subpart, or Section 218.413(b) of this Subpart, as applicable.

e) For letterpress printing line cleaning operations, an owner or operator of a letterpress printing line subject to the requirements of Section 218.413 of this Subpart shall:

1) By May 1, 2010, or upon initial start-up of a new letterpress printing line, whichever is later, certify to the Agency that all cleaning solutions, other than those excluded pursuant to Section 218.412(b), and the handling of all cleaning materials will be in compliance with the requirements of Section 218.413(a)(2)(A) or (a)(2)(B) and (a)(3) of this Subpart. Such certification shall include:
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A) A statement that the cleaning solution will comply with the limitations in Section 218.413(a)(2);

B) Identification of the methods that will be used to demonstrate continuing compliance with the applicable limitations;

C) A sample of the records that will be kept pursuant to Section 218.417(e)(2) of this Subpart; and

D) A description of the practices that ensure that VOM-containing cleaning materials are kept in closed containers;

2) Collect and record the following information for each cleaning solution used on each letterpress printing line:

A) For each cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section 218.413(a)(2)(A) of this Subpart and that is prepared at the source with automatic equipment:

   i) The name and identification of each cleaning solution;

   ii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 218.415(c) of this Subpart;

   iii) Each change to the setting of the automatic equipment, with date, time, description of changes in the cleaning solution constituents (e.g., cleaning solvents), and a description of changes to the proportion of cleaning solvent and water (or other non-VOM);

   iv) The proportion of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution;

   v) The VOM content of the as-used cleaning solution, with supporting calculations; and
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vi) A calibration log for the automatic equipment, detailing periodic checks;

B) For each batch of cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section 218.413(a)(2)(A) of this Subpart, and that is not prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) Date and time of preparation, and each subsequent modification, of the batch;

iii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 218.415(c) of this Subpart;

iv) The total amount of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution; and

v) The VOM content of the as-used cleaning solution, with supporting calculations. For cleaning solutions that are used as purchased, the manufacturer's specifications for VOM content may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 218.105(a) of this Part;

C) For each batch of cleaning solution for which the owner or operator relies on the vapor pressure of the cleaning solution to demonstrate compliance with Section 218.413(a)(2)(B) of this Subpart:

i) The name and identification of each cleaning solution;

ii) Date and time of preparation, and each subsequent modification, of the batch;
iii) The molecular weight, density, and VOM composite partial vapor pressure of each cleaning solvent, as determined in accordance with Section 218.415(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer’s specifications for VOM composite partial vapor pressure may be used if such manufacturer’s specifications are based on results of tests conducted in accordance with methods specified in Sections 218.105(a) and 218.110 of this Part;

iv) The total amount of each cleaning solvent used to prepare the as-used cleaning solution; and

v) The VOM composite partial vapor pressure of each as-used cleaning solution, as determined in accordance with Section 218.415(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer’s specifications for VOM composite partial vapor pressure may be used if such manufacturer’s specifications are based on results of tests conducted in accordance with methods specified in Sections 218.105(a) and 218.110 of this Part;

D) The date, time, and duration of scheduled inspections performed to confirm the proper use of closed containers to control VOM emissions, and any instances of improper use of closed containers, with descriptions of actual practice and corrective action taken, if any;

E) The amount of cleaning materials used on letterpress printing lines at the source that do not comply with the cleaning material limitations set forth in Section 218.413(a)(2) of this Subpart;

3) Notify the Agency in writing of any violation of Section 218.413 of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation.

f) The owner or operator shall maintain all records required by this Section at the source for a minimum period of three years and shall make all records available to the Agency upon request.
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(Source: Added at 34 Ill. Reg. ______, effective ___________)
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1) **Heading of the Part:** Organic Material Emission Standards and Limitations for the Metro East Area

2) **Code Citation:** 35 Ill. Adm. Code 219

3) **Section Numbers:**

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4) **Statutory Authority:** Implementing Sections 21, 22, 22.01 and 22.9, and authorized by Section 27 of the Environmental Protection Act [415 ILCS 5/21, 22, 22.01, 22.9, 27]

5) **A complete description of the subjects and issues involved:** The Illinois Environmental Protection Agency (Agency) proposed this rulemaking to satisfy Illinois' obligation to submit a State Implementation Plan addressing Clean Air Act requirements for sources of
volat_{ile organic material (VOM) emissions in ozone nonattainment areas. The United States Environmental Protection Agency (USEPA) issued Control Techniques Guidelines (CTG) for Group II Consumer and Commercial Product Categories. In the CTG, USEPA recommended control measures that it believes constitute reasonably available control technology (RACT) for those product categories.


6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: The Agency's regulatory proposal included a Technical Support Document, which stated that it relied on sources listed below. Copies of the documents the Agency relied upon are available for review with the Pollution Control Board.


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7) Will this rulemaking replace any emergency rulemaking currently in effect? No

8) Does this rulemaking contain an automatic repeal date? No

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other rulemaking pending on this Part? Yes

<table>
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<th>Proposed Action</th>
<th>Illinois Register Citation</th>
</tr>
</thead>
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<td>219.106</td>
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<td>33 Ill. Reg. 16460; November 20, 2009</td>
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<td>219.204</td>
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<tr>
<td>219.218</td>
<td>Add</td>
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11) Statement of Statewide Policy Objectives: This proposed rulemaking does not create or enlarge a State mandate, as defined in Section 3(b) of the State Mandates Act [30 ILCS 805/3(b) (2008)].

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: The Board will accept written public comment on this proposal for a period of 45 days after the date of this publication. Comments should reference docket R10-08 and be addressed to:

   Clerk's Office
   Illinois Pollution Control Board
   State of Illinois Center, Suite 11-500
   100 W. Randolph St.
   Chicago, IL 60601

Address all questions to Tim Fox at 312-814-6085.

Interested persons may request copies of the Board's opinion and order by calling the Clerk's office at 312-814-3620, or download them from the Board's Web site at www.ipcb.state.il.us.
13) Initial regulatory flexibility analysis:

A) Types of small businesses, small municipalities, and not-for-profit corporations affected: This rulemaking will impact any small business, small municipality, and not-for-profit corporation that falls within one of the Group III Product Categories and meets the applicability thresholds specified in the proposed rules.

B) Reporting, bookkeeping or other procedures required for compliance: The proposed rules require that the owner or operator of a subject source perform emissions monitoring, submit certifications, complete required tests, and maintain records and maker reports as required.

C) Types of professional skills necessary for compliance: No professional skills beyond those currently required by the existing state and federal air pollution control requirements applicable to affected sources will be required.

14) Regulatory Agenda on which this rulemaking was summarized: January 2009

The full text of the Proposed Amendments begins on the next page:
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TITLE 35: ENVIRONMENTAL PROTECTION
SUBTITLE B: AIR POLLUTION
CHAPTER I: POLLUTION CONTROL BOARD
SUBCHAPTER c: EMISSIONS STANDARDS AND LIMITATIONS
FOR STATIONARY SOURCES

PART 219
ORGANIC MATERIAL EMISSION STANDARDS AND LIMITATIONS
FOR THE METRO EAST AREA

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AUTHORITY: Implementing Section 10 and authorized by Sections 27 and 28 of the Environmental Protection Act [415 ILCS 5/10, 27, and 28].


SUBPART A: GENERAL PROVISIONS

Section 219.106  Compliance Dates

a) Except as provided in subsection (b) or (c) below, compliance with the requirements of this Part is required by May 15, 1992, consistent with the provisions of Section 219.103 of this Part.

b) As this Part is amended from time to time, compliance dates included in the specific Subparts supersede the requirements of this Section except as limited by Section 219.101(b) of this Subpart.

c) Any owner or operator of a source subject to the requirements of Section 219.204(o) of this Part shall comply with the requirements in Section 219.204(o), as well as all applicable requirements in Sections 219.205 through 219.211, 219.214, and 219.217 by May 1, 2010.
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(SOURCE: Amended at 34 Ill. Reg. _______, effective ____________)

SUBPART E: SOLVENT CLEANING

Section 219.181 Solvent Cleaning Degreasing Operations in General

The requirements of Sections 219.182, 219.183, 219.184, and 219.186 of this Subpart shall apply to all cold cleaning, open top vapor degreasing, and conveyorized degreasing operations which use volatile organic materials.

(SOURCE: Amended at 34 Ill. Reg. _______, effective ____________)

Section 219.187 Other Industrial Solvent Cleaning Operations

a) Applicability. On and after April 1, 2011:

1) Except as provided in subsection (a)(2) of this Section, the requirements of this Section shall apply to all cleaning operations that use organic materials at sources that emit a total of 6.8 kg/day (15 lbs/day) or more of VOM from cleaning operations at the source, in the absence of air pollution control equipment. For purposes of this Section, "cleaning operation" means the process of cleaning products, product components, tools, equipment, or general work areas during production, repair, maintenance or servicing, including but not limited to spray gun cleaning, spray booth cleaning, large and small manufactured components cleaning, parts cleaning, equipment cleaning, line cleaning, floor cleaning, and tank cleaning, at sources with emission units;

2) Notwithstanding subsection (a)(1) of this Section:

A) The following cleaning operations shall be exempt from the requirements of subsections (b), (c), (d), (f), and (g) of this Section:

i) Cleaning operations subject to the limitations in Sections 219.182, 219.183, or 219.184:

ii) Janitorial cleaning;
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iii) Stripping of cured coatings, inks, or adhesives, including screen reclamation activities;

iv) Cleaning operations in printing pre-press areas, including the cleaning of film processors, color scanners, plate processors, film cleaning, and plate cleaning;

B) Cleaning operations for emission units within the following source categories shall be exempt from the requirements of subsections (b), (c), (d), (f), and (g) of this Section:

i) Aerospace coating;

ii) Flexible package printing;

iii) Lithographic printing;

iv) Letterpress printing;

v) Flat wood paneling coating;

vi) Large appliance coating;

vii) Metal furniture coating;

viii) Paper, film, and foil coating;

ix) Wood furniture coating;

x) Shipbuilding and repair coating;

xi) Plastic parts coating;

xii) Miscellaneous metal parts coating;

xiii) Fiberglass boat manufacturing;

xiv) Miscellaneous industrial adhesives; and
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xv) Auto and light-duty truck assembly coating;

C) The following cleaning operations shall be exempt from the requirements of subsections (b), (c), (f), and (g) of this Section:

i) Cleaning of solar cells, laser hardware, scientific instruments, and high-precision optics;

ii) Cleaning conducted as part of performance laboratory tests on coatings, adhesives, or inks; research and development operations; or laboratory tests in quality assurance laboratories;

iii) Cleaning of paper-based gaskets and clutch assemblies where rubber is bonded to metal by means of an adhesive;

iv) Cleaning of cotton swabs to remove cottonseed oil before cleaning of high-precision optics;

v) Cleaning of medical device and pharmaceutical manufacturing facilities using no more than 1.5 gallons per day of solvents;

vi) Cleaning of adhesive application equipment used for thin metal laminating;

vii) Cleaning of electronic or electrical cables;

viii) Touch-up cleaning performed on printed circuit boards where surface mounted devices have already been attached;

ix) Cleaning of coating and adhesive application processes utilized to manufacture transdermal drug delivery products using no more than three gallons per day of ethyl acetate;

x) Cleaning of application equipment used to apply coatings on satellites and radiation effect coatings;
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xi) Cleaning of application equipment used to apply solvent-borne fluoropolymer coatings;

xii) Cleaning of ultraviolet or electron beam adhesive application;

xiii) Cleaning of sterilization indicating ink application equipment if the facility uses no more than 1.5 gallons per day of solvents for such cleaning;

xiv) Cleaning of metering rollers, dampening rollers, and printing plates;

xv) Cleaning of numismatic dies; and

xvi) Cleaning operations associated with digital printing.

b) Material and Control Requirements. No owner or operator of a source subject to this Section shall perform any cleaning operation subject to this Section unless the owner or operator meets the requirements in subsection (b)(1), (b)(2), or (b)(3):

1) The VOM content of the as-used cleaning solutions (minus water and any compounds that are specifically exempted from the definition of VOM) does not exceed the following emissions limitations:

A) Product cleaning during manufacturing process or surface preparation for coating, adhesive, or ink application:

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<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
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<tbody>
<tr>
<td>i)</td>
<td>Electrical apparatus components and electronic components</td>
<td>0.10</td>
</tr>
<tr>
<td>ii)</td>
<td>Medical device and pharmaceutical manufacturing</td>
<td>0.80</td>
</tr>
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B) Repair and maintenance cleaning:
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i) **Electrical apparatus components and electronic**
   - kg/l: 0.10
   - lb/gal: 0.83

ii) **Medical device and pharmaceutical manufacturing: tools, equipment, and machinery**
   - kg/l: 0.80
   - lb/gal: 6.7

iii) **Medical device and pharmaceutical manufacturing: general work surfaces**
    - kg/l: 0.60
    - lb/gal: 5.0

C) **Cleaning of ink application equipment:**

i) **Rotogravure printing that does not print flexible packaging**
   - kg/l: 0.10
   - lb/gal: 0.83

ii) **Screen printing**
    - kg/l: 0.50
    - lb/gal: 4.2

iii) **Ultraviolet ink and electron beam ink application equipment, except screen printing**
    - kg/l: 0.65
    - lb/gal: 5.4

iv) **Flexographic printing that does not print flexible packaging**
    - kg/l: 0.10
    - lb/gal: 0.83

D) **All other cleaning operations not subject to a specific limitation in subsections (b)(1)(A) through (b)(1)(C) of this Section**
   - kg/l: 0.050
   - lb/gal: 0.42

2) **The composite vapor pressure of each as-used cleaning solution used does not exceed 8.0 mmHg measured at 20°C (68°F); or**

3) **An afterburner or carbon adsorber is installed and operated that reduces VOM emissions from the subject cleaning operation by at least 85 percent overall. The owner or operator may use an emissions control system other than an afterburner or carbon adsorber if such device reduces VOM emissions from the subject cleaning operation by at least 85 percent**
overall, the owner or operator submits a plan to the Agency detailing appropriate monitoring devices, test methods, recordkeeping requirements, and operating parameters for such control device, and such plan is approved by the Agency and USEPA within federally enforceable permit conditions.

c) The owner or operator of a subject source shall demonstrate compliance with this Section by using the applicable test methods and procedures specified in subsection (g) of this Section and by complying with the recordkeeping and reporting requirements specified in subsection (e) of this Section.

d) Operating Requirements. The owner or operator of a source subject to the requirements of this Section shall comply with the following for each subject cleaning operation:

1) Cover open containers and properly cover and store applicators used to apply cleaning solvents;

2) Minimize air circulation around the cleaning operation;

3) Dispose of all used cleaning solutions, cleaning towels, and applicators used to apply cleaning solvents in closed containers;

4) Utilize equipment practices that minimize emissions.

e) Recordkeeping and Reporting Requirements.

1) The owner or operator of a source exempt from the limitations of this Section because of the criteria in Section 219.187(a)(1) of this Subpart shall comply with the following:

A) By April 1, 2011, or upon initial start-up of the source, whichever is later, submit a certification to the Agency that includes:

i) A declaration that the source is exempt from the requirements of this Section because of the criteria in Section 219.187(a)(1);
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ii) Calculations that demonstrate that combined emissions of VOM from cleaning operations at the source never equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment;

B) Notify the Agency of any record that shows that the combined emissions of VOM from cleaning operations at the source ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, within 30 days after the event occurs.

2) All sources subject to the requirements of this Section shall:

A) By April 1, 2011, or upon initial start-up of the source, whichever is later, submit a certification to the Agency that includes:

i) A declaration that all subject cleaning operations are in compliance with the requirements of this Section;

ii) Identification of each subject cleaning operation and each VOM-containing cleaning solution used as of the date of certification in such operation;

iii) If complying with the emissions control system requirement, what type of emissions control system will be used;

iv) Initial documentation that each subject cleaning operation will comply with the applicable limitation, including copies of manufacturer's specifications, test results (if any), formulation data, and calculations;

v) Identification of the methods that will be used to demonstrate continuing compliance with the applicable limitations;

vi) A description of the practices and procedures that the source will follow to ensure compliance with the limitations in Section 219.187(d); and
vii) A description of each cleaning operation exempt pursuant to Section 219.187(a)(2), if any, and a listing of the emission units on which the exempt cleaning operation is performed;

B) At least 30 calendar days before changing the method of compliance between subsections (b)(1) or (b)(2) and subsection (b)(3) of this Section, notify the Agency in writing of such change. The notification shall include a demonstration of compliance with the newly applicable subsection;

3) All sources complying with this Section pursuant to the requirements of subsection (b)(1) of this Section shall collect and record the following information for each cleaning solution used:

A) For each cleaning solution that is prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) The VOM content of each cleaning solvent in the cleaning solution;

iii) Each change to the setting of the automatic equipment, with date, time, description of changes in the cleaning solution constituents (e.g., cleaning solvents), and a description of changes to the proportion of cleaning solvent and water (or other non-VOM);

iv) The proportion of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution;

v) The VOM content of the as-used cleaning solution, with supporting calculations; and

vi) A calibration log for the automatic equipment, detailing periodic checks;
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B) For each batch of cleaning solution that is not prepared at the source with automatic equipment:
   i) The name and identification of each cleaning solution;
   ii) Date, time of preparation, and each subsequent modification of the batch;
   iii) The VOM content of each cleaning solvent in the cleaning solution;
   iv) The total amount of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution; and
   v) The VOM content of the as-used cleaning solution, with supporting calculations. For cleaning solutions that are not prepared at the site but are used as purchased, the manufacturer's specifications for VOM content may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 219.105(a) of this Part;

4) All sources complying with this Section pursuant to the requirements of subsection (b)(2) of this Section shall collect and record the following information for each cleaning solution used:
   A) The name and identification of each cleaning solution;
   B) Date, time of preparation, and each subsequent modification of the batch;
   C) The molecular weight, density, and VOM composite partial vapor pressure of each cleaning solvent, as determined in accordance with the applicable methods and procedures specified in Section 219.110 of this Part;
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D) The total amount of each cleaning solvent used to prepare the as-used cleaning solution; and

E) The VOM composite partial vapor pressure of each as-used cleaning solution, as determined in accordance with the applicable methods and procedures specified in Section 219.110 of this Part;

5) All sources complying with this Section pursuant to the requirements of subsection (b)(3) of this Section shall comply with the following:

A) By April 1, 2011, or upon initial start-up of the source, whichever is later, and upon initial start-up of a new emissions control system, include in the certification required by subsection (e)(3) of this Section a declaration that the monitoring equipment required under Section 219.187(f) of this Subpart has been properly installed and calibrated according to manufacturer's specifications;

B) If testing of an emissions control system is conducted pursuant to Section 219.187(g) of this Subpart, the owner or operator shall, within 90 days after conducting such testing, submit a copy of all test results to the Agency and shall submit a certification to the Agency that includes the following:

i) A declaration that all tests and calculations necessary to demonstrate compliance with Section 219.187(b)(3) of this Subpart have been properly performed;

ii) A statement whether the subject cleaning operation is or is not in compliance with Section 219.187(b)(3) of this Subpart; and

iii) The operating parameters of the emissions control system during testing, as monitored in accordance with Section 219.187(f) of this Subpart;

C) Collect and record daily the following information for each cleaning operation subject to the requirements of Section 219.187(b)(3) of this Subpart:
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i) Emissions control system monitoring data in accordance with Section 219.187(f) of this Subpart, as applicable;

ii) A log of operating time for the emissions control system, monitoring equipment, and associated cleaning equipment;

iii) A maintenance log for the emissions control system and monitoring equipment detailing all routine and non-routine maintenance performed, including dates and duration of any outages;

D) Maintain records documenting the use of good operating practices consistent with the equipment manufacturer’s specifications for the cleaning equipment being used and the emissions control system equipment. At a minimum, these records shall include:

i) Records for periodic inspection of the cleaning equipment and emissions control system equipment with date of inspection, individual performing the inspection, and nature of inspection;

ii) Records for repair of malfunctions and breakdowns with identification and description of incident, date identified, date repaired, nature of repair, and the amount of VOM released into the atmosphere as a result of the incident;

6) All sources subject to the requirements of subsections (b) and (d) of this Section shall notify the Agency of any violation of subsection (b) or (d) by providing a description of the violation and copies of records documenting the violation to the Agency within 30 days following the occurrence of the violation;

7) All records required by this subsection (e) shall be retained by the source for at least three years and shall be made available to the Agency upon request.

f) Monitoring Requirements.
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1) If an afterburner or carbon adsorber is used to demonstrate compliance, the owner or operator of a source subject to Section 219.187(b)(3) of this Subpart shall:

A) Install, calibrate, operate, and maintain temperature monitoring devices with an accuracy of 3° C or 5° F on the emissions control system in accordance with Section 219.105(d)(2) of this Part and in accordance with the manufacturer's specifications. Monitoring shall be performed at all times when the emissions control system is operating; and

B) Install, calibrate, operate and maintain, in accordance with manufacturer's specifications, a continuous recorder on the temperature monitoring devices, such as a strip chart, recorder or computer, with at least the same accuracy as the temperature monitor;

2) If an emissions control system other than an afterburner or carbon adsorber is used to demonstrate compliance, the owner or operator of a source subject to Section 219.187(b)(3) of this Subpart shall install, maintain, calibrate, and operate such monitoring equipment as set forth in the owner's or operator's plan approved by the Agency and USEPA pursuant to Section 219.187(b)(3).

g) Testing Requirements.

1) Testing to demonstrate compliance with the requirements of this Section shall be conducted by the owner or operator within 90 days after a request by the Agency, or as otherwise specified in this Section. Such testing shall be conducted at the expense of the owner or operator and the owner or operator shall notify the Agency in writing 30 days in advance of conducting the testing to allow the Agency to be present during the testing;

2) Testing to demonstrate compliance with the VOM content limitations in Section 219.187(b)(1) of this Subpart, and to determine the VOM content of cleaning solvents and cleaning solutions, shall be conducted as follows:
A) The applicable test methods and procedures specified in Section 219.105(a) of this Part shall be used; provided, however, Method 24, incorporated by reference in Section 219.112 of this Part, shall be used to demonstrate compliance; or

B) The manufacturer's specifications for VOM content for cleaning solvents may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 219.105(a) of this Part; provided, however, Method 24 shall be used to determine compliance;

3) Testing to determine the VOM composite partial vapor pressure of cleaning solvents, cleaning solvent concentrates, and as-used cleaning solutions shall be conducted in accordance with the applicable methods and procedures specified in Section 219.110 of this Part;

4) For afterburners and carbon adsorbers, the methods and procedures of Section 219.105(d) through (f) shall be used for testing to demonstrate compliance with the requirements of Section 219.187(b)(3) of this Subpart, as follows:

A) To select the sampling sites, Method 1 or 1A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 219.112 of this Part;

B) To determine the volumetric flow rate of the exhaust stream, Method 2, 2A, 2C, or 2D, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 219.112 of this Part;

C) To determine the VOM concentration of the exhaust stream entering and exiting the emissions control system, Method 25 or 25A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 219.112 of this Part. For thermal and catalytic afterburners, Method 25 must be used except under the following circumstances, in which case Method 25A must be used:

i) The allowable outlet concentration of VOM from the emissions control system is less than 50 ppmv, as carbon:
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ii) The VOM concentration at the inlet of the emissions control system and the required level of control result in exhaust concentrations of VOM of 50 ppmv, or less, as carbon; and

iii) Due to the high efficiency of the emissions control system, the anticipated VOM concentration at the emissions control system exhaust is 50 ppmv or less, as carbon, regardless of inlet concentration. If the source elects to use Method 25A under this option, the exhaust VOM concentration must be 50 ppmv or less, as carbon, and the required destruction efficiency must be met for the source to have demonstrated compliance. If the Method 25A test results show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, a retest is required. The retest shall be conducted using either Method 25 or Method 25A. If the retest is conducted using Method 25A and the test results again show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, the source must retest using Method 25;

D) During testing, the cleaning equipment shall be operated at representative operating conditions and flow rates;

5) An owner or operator using an emissions control system other than an afterburner or carbon adsorber shall conduct testing to demonstrate compliance with the requirements of Section 219.187(b)(3) of this Subpart as set forth in the owner's or operator's plan approved by the Agency and USEPA as federally enforceable permit conditions pursuant to Section 219.187(b)(3) of this Subpart.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

SUBPART F: COATING OPERATIONS

Section 219.204 Emission Limitations
POLLUTION CONTROL BOARD

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Except as provided in Sections 219.205, 219.207, 219.208, 219.212, 219.215 and 219.216 of this Subpart, no owner or operator of a coating line shall apply at any time any coating in which the VOM content exceeds the following emission limitations for the specified coating. Except as provided in Sections 219.204(l) and 219.204(o), compliance with the emission limitations marked with an asterisk in this Section is required on and after March 15, 1996, and compliance with emission limitations not marked with an asterisk is required until March 15, 1996. The following emission limitations are expressed in units of VOM per volume of coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied at each coating applicator, except where noted. Compounds which are specifically exempted from the definition of VOM should be treated as water for the purpose of calculating the "less water" part of the coating composition. Compliance with this Subpart must be demonstrated through the applicable coating analysis test methods and procedures specified in Section 219.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 219.211(c) of this Subpart except where noted. (Note: The equation presented in Section 219.206 of this Part shall be used to calculate emission limitations for determining compliance by add-on controls, credits for transfer efficiency, emissions trades and cross-line averaging.)

The emission limitations are as follows:

<table>
<thead>
<tr>
<th>a)</th>
<th>Automotive or Light-Duty Truck Coating</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1)</td>
<td>Prime coat</td>
<td>0.14</td>
<td>(1.2)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.14*</td>
<td>(1.2)*</td>
</tr>
<tr>
<td>2)</td>
<td>Primer surface coat</td>
<td>1.81</td>
<td>(15.1)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.81*</td>
<td>(15.1)*</td>
</tr>
</tbody>
</table>

(Note: The primer surface coat limitation is in units of kg (lbs) of VOM per 1 (gal) of coating solids deposited. Compliance with the limitation shall be based on the daily-weighted average from an entire primer surface operation. Compliance shall be demonstrated in accordance with the topcoat protocol referenced in Section 219.105(b) and the recordkeeping and reporting requirements specified in Section 219.211(f). Testing to demonstrate compliance shall be performed in accordance with the topcoat protocol and a detailed testing proposal approved by the Agency and USEPA specifying the method of demonstrating compliance with the protocol. Section 219.205 does not apply to the primer surface limitation.)

<table>
<thead>
<tr>
<th>3)</th>
<th>Topcoat</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1.81</td>
<td>(15.1)</td>
</tr>
</tbody>
</table>
POLLUTION CONTROL BOARD

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1.81* (15.1)*

(Note: The topcoat limitation is in units of kg (lbs) of VOM per 1 (gal) of coating solids deposited. Compliance with the limitation shall be based on the daily-weighted average from an entire topcoat operation. Compliance shall be demonstrated in accordance with the topcoat protocol referenced in Section 219.105(b) of this Part and the recordkeeping and reporting requirements specified in Section 219.211(f). Testing to demonstrate compliance shall be performed in accordance with the topcoat protocol and a detailed testing proposal approved by the Agency and USEPA specifying the method of demonstrating compliance with the protocol. Section 219.205 of this Part does not apply to the topcoat limitation.)

<table>
<thead>
<tr>
<th>4) Final repair coat</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.58</td>
<td>(4.8)</td>
</tr>
<tr>
<td></td>
<td>0.58*</td>
<td>(4.8)*</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>b) Can Coating</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>1) Sheet basecoat and overvarnish</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Sheet basecoat</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>0.34</td>
</tr>
<tr>
<td>0.26*</td>
</tr>
<tr>
<td>B) Overvarnish</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>0.34</td>
</tr>
<tr>
<td>0.34*</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2) Exterior basecoat and overvarnish</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.34</td>
</tr>
<tr>
<td>0.25*</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3) Interior body spray coat</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Two piece</td>
</tr>
<tr>
<td>0.51</td>
</tr>
<tr>
<td>0.44*</td>
</tr>
<tr>
<td>B) Three piece</td>
</tr>
<tr>
<td>0.51</td>
</tr>
<tr>
<td>0.51*</td>
</tr>
</tbody>
</table>

| 4) Exterior end coat               |
| 0.51                               |
| 0.51*                              |
POLLUTION CONTROL BOARD

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<table>
<thead>
<tr>
<th></th>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>5) Side seam spray coat</td>
<td>0.66</td>
<td>(5.5)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.66*</td>
<td>(5.5)*</td>
</tr>
<tr>
<td>6) End sealing compound coat</td>
<td>0.44</td>
<td>(3.7)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.44*</td>
<td>(3.7)*</td>
</tr>
</tbody>
</table>

(c) Paper Coating

(Note: The paper coating limitation shall not apply to any owner or operator of any paper coating line on which flexographic, rotogravure, lithographic, or letterpress printing is performed if the paper coating line complies with the applicable emissions limitations in Subpart H Section 219.401 of this Part. In addition, screen printing on paper is not regulated as paper coating, but is regulated under Subpart TT of this Part.)

d) Coil Coating

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>0.31</td>
<td>(2.6)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0.20*</td>
<td>(1.7)*</td>
</tr>
</tbody>
</table>

e) Fabric Coating

|   |                          | 0.35 | (2.9)  |
|   |                          | 0.28*| (2.3)* |

f) Vinyl Coating

|   |                          | 0.45 | (3.8)  |
|   |                          | 0.28*| (2.3)* |

g) Metal Furniture Coating

|   |                          | 0.36 | (3.0)  |
|   |                          | 0.34*| (2.8)* |

|   |                          | 0.36 | (3.0)  |
|   |                          | 0.28*| (2.3)* |

h) Large Appliance Coating

|   |                          | 0.34 | (2.8)  |
|   |                          | 0.34*| (2.8)* |
### POLLUTION CONTROL BOARD

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2) **Baked**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.34</td>
<td>(2.8)</td>
</tr>
<tr>
<td></td>
<td>0.28*</td>
<td>(2.3)*</td>
</tr>
</tbody>
</table>

(Note: The limitation shall not apply to the use of quick-drying lacquers for repair of scratches and nicks that occur during assembly, provided that the volume of coating does not exceed 0.95 l (1 quart) in any one rolling eight-hour period.)

#### i) Magnet Wire Coating

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.20</td>
<td>(1.7)</td>
</tr>
<tr>
<td></td>
<td>0.20*</td>
<td>(1.7)*</td>
</tr>
</tbody>
</table>

#### j) Miscellaneous Metal Parts and Products Coating

1) **Clear coating**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.52</td>
<td>(4.3)</td>
</tr>
<tr>
<td></td>
<td>0.52*</td>
<td>(4.3)*</td>
</tr>
</tbody>
</table>

2) **Extreme performance coating**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Air dried</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>B) Baked</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td>0.40*</td>
<td>(3.3)*</td>
</tr>
</tbody>
</table>

3) **Steel pail and drum interior coating**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0.52</td>
<td>(4.3)</td>
</tr>
<tr>
<td></td>
<td>0.52*</td>
<td>(4.3)*</td>
</tr>
</tbody>
</table>

4) **All other coatings**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Air dried</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td>0.40*</td>
<td>(3.3)*</td>
</tr>
<tr>
<td>B) Baked</td>
<td>0.36</td>
<td>(3.0)</td>
</tr>
<tr>
<td></td>
<td>0.34*</td>
<td>(2.8)*</td>
</tr>
</tbody>
</table>

5) **Metallic Coating**

<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Air dried</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>B) Baked</td>
<td>0.36</td>
<td>(3.0)</td>
</tr>
</tbody>
</table>
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0.36  (3.0)*

6) For purposes of subsection 219.204(j)(5) of this Section, "metallic coating" means a coating which contains more than ¼ lb/gal of metal particles, as applied.

<table>
<thead>
<tr>
<th>k) Heavy Off-Highway Vehicle Products Coating</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Extreme performance prime coat</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>2) Extreme performance topcoat (air dried)</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>3) Final repair coat (air dried)</td>
<td>0.42</td>
<td>(3.5)</td>
</tr>
<tr>
<td></td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
</tbody>
</table>

4) All other coatings are subject to the emission limitations for miscellaneous metal parts and products coatings in subsection (j) above.

<table>
<thead>
<tr>
<th>l) Wood Furniture Coating</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Limitations before March 15, 1998:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A) Clear topcoat</td>
<td>0.67</td>
<td>(5.6)</td>
</tr>
<tr>
<td>B) Opaque stain</td>
<td>0.56</td>
<td>(4.7)</td>
</tr>
<tr>
<td>C) Pigmented coat</td>
<td>0.60</td>
<td>(5.0)</td>
</tr>
<tr>
<td>D) Repair coat</td>
<td>0.67</td>
<td>(5.6)</td>
</tr>
<tr>
<td>E) Sealer</td>
<td>0.67</td>
<td>(5.6)</td>
</tr>
<tr>
<td>F) Semi-transparent stain</td>
<td>0.79</td>
<td>(6.6)</td>
</tr>
<tr>
<td>G) Wash coat</td>
<td>0.73</td>
<td>(6.1)</td>
</tr>
</tbody>
</table>

(Note: Prior to March 15, 1998, an owner or operator of a wood furniture coating operation subject to this Section shall apply all coatings, with the exception of no more than 37.8 l (10 gal) of coating per day used for touch-up and repair operations, using one or more of the following application
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systems: airless spray application system, air-assisted airless spray application system, electrostatic spray application system, electrostatic bell or disc spray application system, heated airless spray application system, roller coating, brush or wipe coating application system, dip coating application system or high volume low pressure (HVLP) application system.)

2) On and after March 15, 1998, wood furniture sealers and topcoats must comply with one of the limitations specified in subsections (l)(2)(A) through (E), below:

<table>
<thead>
<tr>
<th></th>
<th>kg VOM/kg solids</th>
<th>lb VOM/lb solids</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Topcoat</td>
<td>0.8</td>
<td>(0.8)</td>
</tr>
<tr>
<td>B) Sealers and topcoats with the following limits:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Sealer other than acid-cured alkyd amino vinyl sealer</td>
<td>1.9</td>
<td>(1.9)</td>
</tr>
<tr>
<td>ii) Topcoat other than acid-cured alkyd amino conversion varnish topcoat</td>
<td>1.8</td>
<td>(1.8)</td>
</tr>
<tr>
<td>iii) Acid-cured alkyd amino vinyl sealer</td>
<td>2.3</td>
<td>(2.3)</td>
</tr>
<tr>
<td>iv) Acid-cured alkyd amino conversion varnish topcoat</td>
<td>2.0</td>
<td>(2.0)</td>
</tr>
<tr>
<td>C) Meet the provisions of Section 219.215 of this Subpart for use of an averaging approach;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D) Achieve a reduction in emissions equivalent to the requirements of Section 219.204(l)(2)(A) or (B) of this Subpart, as calculated using Section 219.216 of this Subpart; or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E) Use a combination of the methods specified in Section 219.204(l)(2)(A) through (D) of this Subpart.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3) Other wood furniture coating limitations on and after March 15, 1998:
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<table>
<thead>
<tr>
<th></th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Opaque stain</td>
<td>0.56</td>
<td>(4.7)</td>
</tr>
<tr>
<td>B) Non-topcoat pigmented coat</td>
<td>0.60</td>
<td>(5.0)</td>
</tr>
<tr>
<td>C) Repair coat</td>
<td>0.67</td>
<td>(5.6)</td>
</tr>
<tr>
<td>D) Semi-transparent stain</td>
<td>0.79</td>
<td>(6.6)</td>
</tr>
<tr>
<td>E) Wash coat</td>
<td>0.73</td>
<td>(6.1)</td>
</tr>
</tbody>
</table>

4) Other wood furniture coating requirements on and after March 15, 1998:

A) No source subject to the limitations of subsection (l)(2) or (3) of this Section and utilizing one or more wood furniture coating spray booths shall use strippable spray booth coatings containing more than 0.8 kg VOM/kg solids (0.8 lb VOM/lb solids), as applied.

B) Any source subject to the limitations of subsection (l)(2) or (3) of this Section shall comply with the requirements of Section 219.217 of this Subpart.

C) Any source subject to the limitations of subsection (l)(2)(A) or (B) of this Section and utilizing one or more continuous coaters, shall for each continuous coater, use an initial coating which complies with the limitations of subsection (l)(2)(A) or (B) of this Section. The viscosity of the coating in each reservoir shall always be greater than or equal to the viscosity of the initial coating in the reservoir. The owner or operator shall:

i) Monitor the viscosity of the coating in the reservoir with a viscosity meter or by testing the viscosity of the initial coating and retesting the coating in the reservoir each time solvent is added;

ii) Collect and record the reservoir viscosity and the amount and weight of VOM per weight of solids of coating and solvent each time coating or solvent is added; and
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iii) Maintain these records at the source for a period of three years.

<table>
<thead>
<tr>
<th>m) Plastic Parts Coating: Automotive/Transportation</th>
<th>kg/l</th>
<th>lb/gal</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Interiors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A) Baked</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Color coat</td>
<td>0.49*</td>
<td>(4.1)*</td>
</tr>
<tr>
<td>ii) Primer</td>
<td>0.46*</td>
<td>(3.8)*</td>
</tr>
<tr>
<td>B) Air dried</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Color coat</td>
<td>0.38*</td>
<td>(3.2)*</td>
</tr>
<tr>
<td>ii) Primer</td>
<td>0.42*</td>
<td>(3.5)*</td>
</tr>
<tr>
<td>2) Exteriors (flexible and non-flexible)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A) Baked</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Primer</td>
<td>0.60*</td>
<td>(5.0)*</td>
</tr>
<tr>
<td>ii) Primer non-flexible</td>
<td>0.54*</td>
<td>(4.5)*</td>
</tr>
<tr>
<td>iii) Clear coat</td>
<td>0.52*</td>
<td>(4.3)*</td>
</tr>
<tr>
<td>iv) Color coat</td>
<td>0.55*</td>
<td>(4.6)*</td>
</tr>
<tr>
<td>B) Air Dried</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) Primer</td>
<td>0.66*</td>
<td>(5.5)*</td>
</tr>
<tr>
<td>ii) Clear coat</td>
<td>0.54*</td>
<td>(4.5)*</td>
</tr>
<tr>
<td>iii) Color coat (red &amp; black)</td>
<td>0.67*</td>
<td>(5.6)*</td>
</tr>
<tr>
<td>iv) Color coat (others)</td>
<td>0.61*</td>
<td>(5.1)*</td>
</tr>
<tr>
<td>3) Specialty</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A) Vacuum metallizing basecoats, texture basecoats</td>
<td>0.66*</td>
<td>(5.5)*</td>
</tr>
</tbody>
</table>
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B) Black coatings, reflective argent coatings, air bag cover coatings, and soft coatings 0.71* (5.9)*

C) Gloss reducers, vacuum metallizing topcoats, and texture topcoats 0.77* (6.4)*

D) Stencil coatings, adhesion primers, ink pad coatings, electrostatic prep coatings, and resist coatings 0.82* (6.8)*

E) Head lamp lens coatings 0.89* (7.4)*

n) Plastic Parts Coating: Business Machine kg/l lb/gal

1) Primer 0.14* (1.2)*

2) Color coat (non-texture coat) 0.28* (2.3)*

3) Color coat (texture coat) 0.28* (2.3)*

4) Electromagnetic interference/radio frequency interference (EMI/RFI) shielding coatings 0.48* (4.0)*

5) Specialty Coatings

A) Soft coat 0.52* (4.3)*

B) Plating resist 0.71* (5.9)*

C) Plating sensitizer 0.85* (7.1)*

0) Flat Wood Paneling Coatings. On and after May 1, 2010, flat wood paneling coatings shall comply with one of the following limitations:

1) 0.25 kg VOM/l of coatings (2.1 lb VOM/gal coatings); or

2) 0.35 kg VOM/l solids (2.9 lb VOM/gal solids).

(Source: Amended at 34 Ill. Reg. ______, effective ___________)
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Section 219.205 Daily-Weighted Average Limitations

No owner or operator of a coating line subject to the limitations of Section 219.204 of this Subpart and complying by means of this Section shall operate the subject coating line unless the owner or operator has demonstrated compliance with subsection (a), (b), (c), (d), (e), (f), (g), or (h) of this Section (depending upon the category of coating) through the applicable coating analysis test methods and procedures specified in Section 219.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 219.211(d) of this Subpart:

a) No owner or operator of a coating line subject to only one of the limitations from among Section 219.204(a)(1), (a)(4), (c), (d), (e), (f), or (i), or (o) of this Subpart shall apply coatings on any such coating line, during any day, whose daily-weighted average VOM content exceeds the emission limitation to which the coatings are subject.

b) No owner or operator of a miscellaneous metal parts and products coating line subject to the limitations of Section 219.204(j) of this Subpart shall apply coatings to miscellaneous metal parts or products on the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 219.204(j) of this Subpart during the same day (e.g., all coatings used on the line are subject to 0.42 kg/l (3.5 lbs/gal), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 219.204(j) of this Subpart, during the same day, the owner or operator shall have a site-specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA’s Emissions Trading Policy Statement (and related policy) 51 Fed. Reg. 43814 (December 4, 1986), must be satisfied.

c) No owner or operator of a can coating line subject to the limitations of Section 219.204(b) of this Subpart shall operate the subject coating line using a coating with a VOM content in excess of the limitations specified in Section 219.204(b)
of this Subpart unless all of the following requirements are met:

1) An alternative daily emission limitation for the can coating operation, i.e., for all of the can coating lines at the source, shall be determined according to subsection (c)(2) of this Section. Actual daily emissions shall never exceed the alternative daily emission limitation and shall be calculated by use of the following equation.

\[ E_d = \sum_{i=1}^{n} V_i C_i \]

where:

\( E_d \) = Actual VOM emissions for the day in units of kg/day (lbs/day);

\( i \) = Subscript denoting a specific coating applied;

\( n \) = Total number of coatings applied in the can coating operation, i.e. all can coating lines at the source;

\( V_i \) = Volume of each coating applied for the day in units of l/day (gal/day) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);

\( C_i \) = The VOM content of each coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM).

2) The alternative daily emission limitation \( (A_d) \) shall be determined for the can coating operation, i.e., for all of the can coating lines at the source, on a daily basis as follows:

\[ A_d = \sum_{i=1}^{n} V_i L_i \frac{(D_i - C_i)}{(D_i - L_i)} \]

where:
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\[ A_d = \text{The VOM emissions allowed for the day in units of kg/day (lbs/day)}; \]

\[ i = \text{Subscript denoting a specific coating applied}; \]

\[ n = \text{Total number of surface coatings applied in the can coating operation}; \]

\[ C_i = \text{The VOM content of each surface coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM)}; \]

\[ D_i = \text{The density of VOM in each coating applied. For the purposes of calculating } A_d, \text{ the density is } 0.882 \text{kg VOM/l VOM (7.36 lbs VOM/gal VOM)}; \]

\[ V_i = \text{Volume of each surface coating applied for the day in units of l (gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM)}; \]

\[ L_i = \text{The VOM emission limitation for each surface coating applied as specified in Section 219.204(b) of this Subpart in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM)}. \]

d) No owner or operator of a heavy off-highway vehicle products coating line subject to the limitations of Section 219.204(k) of this Subpart shall apply coatings to heavy off-highway vehicle products on the subject coating line unless the requirements of subsection (d)(1) or (d)(2) of this Section are met.

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 219.204(k) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.42 kg/l (3.5 lbs/gal), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 219.204(k) of this Subpart,
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during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) 51 Fed. Reg. 43814 (December 4, 1986), must be satisfied.

e) No owner or operator of a wood furniture coating line subject to the limitations of Section 219.204(l)(1) or (l)(3) of this Subpart shall apply coatings to wood furniture on the subject coating line unless the requirements of subsection (e)(1) or (e)(2) of this Section, in addition to the requirements specified in the note to Section 219.204(l)(1) of this Subpart, are met.

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 219.204(l)(1) or (l)(3) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.67 kg/l (5.6 lbs/gal), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 219.204(l)(1) or (l)(3) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and approved by the USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) 51 Fed. Reg. 43814 (December 4, 1986), must be satisfied.

f) No owner or operator of a plastic parts coating line subject to the limitations of Section 219.204(m) or (n) of this Subpart shall apply coatings to business machine or automotive/transportation plastic parts on the subject coating line unless the requirements of subsection (f)(1) or (f)(2) of this Section are met.

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 219.204(m) or (n) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.42 kg/l (3.5 lbs/gal), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or
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2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 219.204(m) or (n) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) must be satisfied.

g) No owner or operator of a metal furniture coating line subject to the limitations of Section 219.204(g) of this Subpart shall apply coatings on the subject coating line unless the requirements of subsection (g)(1) or (g)(2) of this Section are met:

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 219.204(g) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.34 kg/l (2.8 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 219.204(g) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) must be satisfied.

h) No owner or operator of a large appliance coating line subject to the limitations of Section 219.204(h) of this Subpart shall apply coatings on the subject coating line unless the requirements of subsection (h)(1) or (h)(2) of this Section are met.

1) For each coating line which applies multiple coatings, all of which are subject to the same numerical emission limitation within Section 219.204(h) of this Subpart, during the same day (e.g., all coatings used on the line are subject to 0.34 kg/l (2.8 lbs/gal)), the daily-weighted average VOM content shall not exceed the coating VOM content limit corresponding to the category of coating used, or

2) For each coating line which applies coatings subject to more than one numerical emission limitation in Section 219.204(h) of this Subpart, during the same day, the owner or operator shall have a site specific proposal approved by the Agency and USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) must be satisfied.
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proposal approved by the Agency and USEPA as a SIP revision. To receive approval, the requirements of USEPA's Emissions Trading Policy Statement (and related policy) must be satisfied.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.207 Alternative Emission Limitations

a) Any owner or operator of a coating line subject to Section 219.204 of this Subpart may comply with this Section, rather than with Section 219.204 of this Subpart, if a capture system and control device are operated at all times the coating line is in operation and the owner or operator demonstrates compliance with subsection (c), (d), (e), (f), (g), (h), (i), (j), or (k) of this Section (depending upon the source category) through the applicable coating analysis and capture system and control device efficiency test methods and procedures specified in Section 219.105 of this Part and the recordkeeping and reporting requirements specified in Section 219.211(e) of this Subpart; and the control device is equipped with the applicable monitoring equipment specified in Section 219.105(d) of this Part and the monitoring equipment is installed, calibrated, operated and maintained according to vendor specifications at all times the control device is in use. A capture system and control device, which does not demonstrate compliance with subsection (c), (d), (e), (f), (g), (h), (i), (j), or (k) of this Section may be used as an alternative to compliance with Section 219.204 of this Subpart only if the alternative is approved by the Agency and approved by the USEPA as a SIP revision.

b) Alternative Add-On Control Methodologies

1) The coating line is equipped with a capture system and control device that provides 81 percent reduction in the overall emissions of VOM from the coating line and the control device has a 90 percent efficiency, or

2) The system used to control VOM from the coating line is demonstrated to have an overall efficiency sufficient to limit VOM emissions to no more than what is allowed under Section 219.204 of this Subpart. Use of any control system other than an afterburner, carbon adsorption, condensation, or absorption scrubber system can be allowed only if approved by the Agency and approved by the USEPA as a SIP revision. The use of transfer efficiency credits can be allowed only if approved by the Agency and approved by the USEPA as a SIP revision. Baseline transfer efficiencies
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and transfer efficiency test methods must be approved by the Agency and
the USEPA. Such overall efficiency is to be determined as follows:

A) Obtain the emission limitation from the appropriate subsection in
Section 219.204 of this Subpart;

B) Calculate "S" according to the equation in Section 219.206 of this
Subpart;

C) Calculate the overall efficiency required according to Section
219.105(e) of this Part. For the purposes of calculating this value,
according to the equation in Section 219.105(e)(2) of this Part,
VOM1 is equal to the value of "S" as determined above in
subsection (b)(2)(B) of this Section.

c) No owner or operator of a coating line subject to only one of the emission
limitations from among Section 219.204(a)(1), (a)(4), (c), (d), (e), (f) or (i) of this
Subpart and equipped with a capture system and control device shall operate the
subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this
Section are met. No owner or operator of a coating line subject to Section
219.204(a)(2) or (a)(3) of this Part and equipped with a capture system and
control device shall operate the coating line unless the owner or operator
demonstrates compliance with such limitation in accordance with the topcoat
protocol referenced in Section 219.105(b) of this Part.

d) No owner or operator of a miscellaneous metal parts and products coating line
which applies one or more coatings during the same day, all of which are subject
to the same numerical emission limitation within Section 219.204(j) of this
Subpart (e.g., all coatings used on the line are subject to 0.42 kg/1 [3.5 lbs/gal],
and which is equipped with a capture system and control device shall operate the
subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this
Section are met.

e) No owner or operator of a heavy off-highway vehicle products coating line which
applies one or more coatings during the same day, all of which are subject to the
and same numerical emission limitation within Section 219.204(k) of this Subpart
(e.g., all coatings used on the line are subject to 0.42 kg/1 [3.5 lbs/gal]), and
which is equipped with a capture system and control device shall operate the
subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this
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Section are met.

f) No owner or operator of a wood furniture coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 219.204(l) of this Subpart (e.g., all coatings used on the line are subject to 0.67 kg/l [5.6 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met. If compliance is achieved by meeting the requirements in subsection (b)(2) of this Section, then the provisions in the note to Section 219.204(l) of this Subpart must also be met.

g) No owner or operator of a can coating line and equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (g)(1) or (g)(2) of this Section are met.

1) An alternative daily emission limitation for the can coating operation, i.e. for all of the can coating lines at the source, shall be determined according to Section 219.205(c)(2) of this Subpart. Actual daily emissions shall never exceed the alternative daily emission limitation and shall be calculated by use of the following equation:

\[ E_d = \sum_{i=1}^{n} V_i \times C_i \times F_i \]

where:

\[ E_d \] = Actual VOM emissions for the day in units of kg/day (lbs/day);

\[ i \] = Subscript denoting the specific coating applied;

\[ n \] = Total number of surface coatings as applied in the can coating operation;

\[ V_i \] = Volume of each coating as applied for the day in units of 1/day (gal/day) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);
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\[ C_i = \text{The VOM content of each coating as applied in units of kg VOM/l (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM) and} \]

\[ F_i = \text{Fraction, by weight, of VOM emissions from the surface coating, reduced or prevented from being emitted to the ambient air. This is the overall efficiency of the capture system and control device.} \]

2) The coating line is equipped with a capture system and control device that provide 75 percent reduction in the overall emissions of VOM from the coating line and the control device has a 90 percent efficiency.

h) No owner or operator of a plastic parts coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 219.204(m) or (n) of this Subpart (e.g., all coatings used on the line are subject to 0.42 kg/l [3.5 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

i) No owner or operator of a metal furniture coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 219.204(g) of this Subpart (e.g., all coatings used on the line are subject to 0.34 kg/l [2.8 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.

j) No owner or operator of a large appliance coating line which applies one or more coatings during the same day, all of which are subject to the same numerical emission limitation within Section 219.204(h) of this Subpart (e.g., all coatings used on the line are subject to 0.34 kg/l [2.8 lbs/gal]), and which is equipped with a capture system and control device shall operate the subject coating line unless the requirements in subsection (b)(1) or (b)(2) of this Section are met.
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k) No owner or operator of a flat wood paneling coating line that is equipped with a capture system and control device shall operate the subject coating line unless either:

1) The capture system and control device provide at least 90 percent reduction in the overall emissions of VOM from the coating line; or

2) The owner or operator of the flat wood paneling coating line complies with all requirements set forth in subsection (b)(2) of this Section.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.210  Compliance Schedule

Every owner or operator of a coating line (of a type included within Section 219.204 of this Subpart) shall comply with the requirements of Section 219.204, 219.205, 219.207 or 219.208 and Section 219.211 or Sections 219.212 and 219.213 of this Subpart in accordance with the appropriate compliance schedule as specified in subsection (a), (b), (c), (d), (e), (f), or (g) below:

a) No owner or operator of a coating line which is exempt from the limitations of Section 219.204 of this Subpart because of the criteria in Section 219.208(a) or (b) of this Subpart shall operate said coating line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 219.211(b) of this Subpart.

b) No owner or operator of a coating line complying by means of Section 219.204 of this Subpart shall operate said coating line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Sections 219.204 and 219.211(c) of this Subpart.

c) No owner or operator of a coating line complying by means of Section 219.205 of this Subpart shall operate said coating line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Sections 219.205 and 219.211(d) of this Subpart.

d) No owner or operator of a coating line complying by means of Section 219.207 of this Subpart shall operate said coating line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and
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continues to comply with, Sections 219.207 and 219.211(e) of this Subpart.

e) No owner or operator of a coating line subject to one or more of the emission limitations contained in Section 219.204 of this Subpart on or after March 15, 1996, choosing to comply by means of Section 219.204, 219.205 of this Subpart, shall operate said coating line on or after March 15, 1996, unless the owner or operator complies with and continues to comply with, the applicable requirements in Section 219.204, or the alternative control options in Sections 219.205 or 219.207 and the requirements of Section 219.211.

f) No owner or operator of a coating line subject to one or more of the emission limitations contained in Section 219.204 of this Subpart on or after March 15, 1996, choosing to comply by means of Section 219.212 of this Subpart, shall operate said coating line on or after March 15, 1996, unless the owner or operator complies with and continues to comply with the requirements of Sections 219.212 and 219.213 of this Subpart.

g) No owner or operator of a coating line subject to the emission limitations contained in Section 219.204(o) of this Subpart shall operate that coating line on or after a date consistent with Section 219.106(c) of this Part, unless the owner or operator has complied with, and continues to comply with, Section 219.204(o) or the alternative control options in Section 219.205 or 219.207, and the requirements of Sections 219.211 and 219.217 of this Subpart, as applicable.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.211 Recordkeeping and Reporting

a) The VOM content of each coating and the efficiency of each capture system and control device shall be determined by the applicable test methods and procedures specified in Section 219.105 of this Part to establish the records required under this Section.

b) Any owner or operator of a coating line which is exempted from the limitations of Section 219.204 of this Subpart because of Section 219.208(a) or (b) of this Subpart shall comply with the following:

1) For sources exempt from Section 219.208(a) of this Subpart, by a date consistent with Section 219.106 of this Part, the owner or operator of a
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coating line or group of coating lines referenced in subsection (b) of this
Section shall certify to the Agency that the coating line or group of coating
lines is exempt under the provisions of Section 219.208(a) of this Subpart.
Such certification shall include:

A) A declaration that the coating line is exempt from the limitations of
Section 219.204 of this Subpart because of Section 219.208(a) of
this Subpart; and

B) Calculations which demonstrate that the combined VOM
emissions from the coating line and all other coating lines in the
same category never exceed 6.8 kg (15 lbs) per day before the
application of capture systems and control devices. The following
equation shall be used to calculate total VOM emissions:

\[ T_e = \sum_{j=1}^{m} \sum_{i=1}^{n} (A_i B_i) j \]

where:

\[ T_e \] = Total VOM emissions from coating lines each day before
the application of capture systems and control devices in
units of kg/day (lbs/day);

\[ m \] = Number of coating lines at the source that otherwise would
be subject to the same subsection of Section 219.104 of
this Part (because they belong to the same category, e.g.,
can coating);

\[ j \] = Subscript denoting an individual coating line;

\[ n \] = Number of different coatings as applied each day on each
coating line;

\[ i \] = Subscript denoting an individual coating;

\[ A_i \] = Weight of VOM per volume of each coating (minus water
and any compounds which are specifically exempted from
the definition of VOM) as applied each day on each
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coating line in units of kg VOM/l (lbs VOM/gal);

\[ B_i = \text{Volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line in units of l/day (gal/day).} \]

The instrument or method by which the owner or operator accurately measured or calculated the volume of each coating as applied on each coating line each day shall be described in the certification to the Agency.

2) For sources exempt under Section 219.208(b) of this Subpart, by March 15, 1998, or upon initial start-up, the owner or operator of a coating line or a group of coating lines referenced in subsection (b) of this Section shall certify to the Agency that the source is exempt under the provisions of Section 219.208(b) of this Subpart. Such certification shall include:

A) A declaration that the source is exempt from the limitations of Section 219.204(l) of this Subpart because of Section 219.208(b) of this Subpart; and

B) Calculations which demonstrate that the source meets the criteria of exemption because of Section 219.208(b) of this Subpart.

3) For sources exempt under Section 219.208(a) of this Subpart, on and after a date consistent with Section 219.106 of this Part, the owner or operator of a coating line or group of lines referenced in this subsection shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating as applied on each coating line; and

B) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.
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4) For sources exempt under Section 219.208(b) of this Subpart, on and after March 15, 1998, the owner or operator of a coating line or group of coating lines referenced in this subsection (b) shall collect and record all of the following information for each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating as applied on each coating line; and

B) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied on each coating line on a monthly basis.

5) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a coating line or group of coating lines exempted from the limitations of Section 219.204 of this Subpart because of Section 219.208(a) of this Subpart shall notify the Agency of any record showing that total VOM emissions from the coating line or group of coating lines exceed 6.8 kg (15 lbs) in any day before the application of capture systems and control devices by sending a copy of such record to the Agency within 30 days after the exceedance occurs.

6) On and after March 15, 1998, any owner or operator of a source exempt from the limitations of Section 219.204(l) of this Subpart because of Section 219.208(b) of this Subpart shall notify the Agency if the source's VOM emissions exceed the limitations of Section 219.208(b) of this Subpart by sending a copy of calculations showing such an exceedance within 30 days after the change occurs.

c) Any owner or operator of a coating line subject to the limitations of Section 219.204 of this Subpart other than Section 219.204(a)(2) and (a)(3) of this Subpart and complying by means of Section 219.204 of this Subpart shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or upon initial start-up of a new coating line, or upon changing the method of compliance from an existing subject coating line from Section 219.205, Section 219.207, Section 219.215, or Section 219.216 of this Subpart to Section 219.204 of
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this Subpart; the owner or operator of a subject coating line shall certify to the Agency that the coating line will be in compliance with Section 219.204 of this Subpart on and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date. Such certification shall include:

A) The name and identification number of each coating as applied on each coating line;

B) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line;

C) On and after March 15, 1998, for coating lines subject to the limitations of Section 219.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied each day on each coating line;

D) For coating lines subject to the limitations of Section 219.204(o) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

2) On and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating line shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating as applied on each coating line;

B) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line;

C) On and after March 15, 1998, for coating lines subject to the limitations of Section 219.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied
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each day on each coating line and certified product data sheets for each coating; and

D) On and after March 15, 1998, for wood furniture coating spray booths subject to the limitation of Section 219.204(l)(4)(A) of this Subpart, the weight of VOM per weight of solids in each strippable spray booth coating as applied each day on each spray booth and certified product data sheets for each coating; and.

E) For coating lines subject to the limitations of Section 219.204(o) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

3) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a subject coating line shall notify the Agency in the following instances:

A) Any record showing violation of Section 219.204 of this Subpart shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance from Section 219.204 to Section 219.205 or Section 219.207 of this Subpart, the owner or operator shall comply with all requirements of subsection (d)(1) or (e)(1) below, respectively. Upon changing the method of compliance from Section 219.204 to Section 219.205 or Section 219.207 of this Subpart, the owner or operator shall comply with all requirements of subsection (d) or (e) of this Section, respectively.

d) Any owner or operator of a coating line subject to the limitations of Section 219.204 of this Subpart and complying by means of Section 219.205 of this Subpart shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or upon initial start-up of a new coating line, or upon changing the method of compliance for an existing subject coating line from Section 219.204 or Section 219.207 to Section 219.205 of this Subpart; the owner or operator of the subject coating line shall certify to the Agency that the coating line will be in
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compliance with Section 219.205 on and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date. Such certification shall include:

A) The name and identification number of each coating line which will comply by means of Section 219.205 of this Subpart.

B) The name and identification number of each coating as applied on each coating line.

C) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.

D) On and after March 15, 1998, for coating lines subject to the limitations of Section 219.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied each day on each coating line.

E) For coating lines subject to the limitations of Section 219.204(o) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

F) The instrument or method by which the owner or operator will accurately measure or calculate the volume of each coating as applied each day on each coating line.

G) The method by which the owner or operator will create and maintain records each day as required in subsection (d)(2) of this Section.

H) An example of the format in which the records required in subsection (d)(2) of this Section will be kept.

2) On and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating line shall collect and record all of the following information each day for
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each coating line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating as applied on each coating line.

B) The weight of VOM per volume and the volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.

C) On and after March 15, 1998, for coating lines subject to the limitations of Section 219.204(l)(2)(A) or (B) of this Subpart, the weight of VOM per weight of solids in each coating as applied each day on each coating line.

D) For coating lines subject to the limitations of Section 219.204(o) of this Subpart, the weight of VOM per volume of coatings or solids, as applicable, as applied each day on each coating line.

E) The daily-weighted average VOM content of all coatings as applied on each coating line as defined in Section 219.104 of this Part.

3) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a subject coating line shall notify the Agency in the following instances:

A) Any record showing violation of Section 219.205 of this Subpart shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with this Subpart from Section 219.205 to Section 219.204 or Section 219.207 of this Subpart, the owner or operator shall comply with all requirements of subsection (c)(1) or (e)(1) of this Section, respectively. Upon changing the method of compliance with this Subpart from Section 219.205 to Section 219.204 or Section 219.207 of this Subpart, the owner or operator
shall comply with all requirements of subsection (c) or (e) of this Section, respectively.

e) Any owner or operator of a coating line subject to the limitations of Section 219.207 and complying by means of Section 219.207(c), (d), (e), (f), (g), or (h), or (k) of this Subpart shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or upon initial start-up of a new coating line, or upon changing the method of compliance for an existing coating line from Section 219.204 or Section 219.205 to Section 219.207 of this Subpart, the owner or operator of the subject coating line shall perform all tests and submit to the Agency the results of all tests and calculations necessary to demonstrate that the subject coating line will be in compliance with Section 219.207 of this Subpart on and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date.

2) On and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating line shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:

   A) The weight of VOM per volume of coating solids as applied each day on each coating line, if complying pursuant to Section 219.207(b)(2) of this Subpart.

   B) Control device monitoring data.

   C) A log of operating time for the capture system, control device, monitoring equipment and the associated coating line.

   D) A maintenance log for the capture system, control device and monitoring equipment detailing all routine and non-routine maintenance performed including dates and duration of any outages.
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3) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a subject coating line shall notify the Agency in the following instances:

A) Any record showing violation of Section 219.207 of this Subpart shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with this Subpart from Section 219.207 to Section 219.204 or Section 219.205 of this Subpart, the owner or operator shall comply with all requirements of subsection (c)(1) or (d)(1) of this Section, respectively. Upon changing the method of compliance with this Subpart Part from Section 219.207 to Section 219.204 or Section 219.205 of this Subpart, the owner or operator shall comply with all requirements of subsection (c) or (d) of this Section, respectively.

f) Any owner or operator of a primer surfacer operation or topcoat operation subject to the limitations of Section 219.204(a)(2) or (a)(3) of this Subpart shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or upon initial start-up of a new coating operation, the owner or operator of a subject coating operation shall certify to the Agency that the operation will be in compliance with Section 219.204 of this Subpart on and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date. Such certification shall include:

A) The name and identification number of each coating operation which will comply by means of Section 219.204(a)(2) and (a)(3) of this Subpart and the name and identification number of each coating line in each coating operation.

B) The name and identification number of each coating as applied on each coating line in the coating operation.
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C) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted from the definition of VOM) as applied each day on each coating line.

D) The transfer efficiency and control efficiency measured for each coating line.

E) Test reports, including raw data and calculations documenting the testing performed to measure transfer efficiency and control efficiency.

F) The instrument or method by which the owner or operator will accurately measure or calculate the volume of each coating as applied each day on each coating line.

G) The method by which the owner or operator will create and maintain records each day as required in subsection (f)(2) below.

H) An example format for presenting the records required in subsection (f)(2) below.

2) On and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date, the owner or operator of a subject coating operation shall collect and record all of the following information each day for each topcoat or primer surfacer coating operation and maintain the information at the source for a period of three years:

A) All information necessary to calculate the daily-weighted average VOM emissions from the coating operations in kg (lbs) per 1 (gal) of coating solids deposited in accordance with the proposal submitted, and approved pursuant to Section 219.204(a)(2) or (a)(3) of this Subpart including:

i) The name and identification number of each coating as applied on each coating operation.

ii) The weight of VOM per volume of each coating (minus water and any compounds which are specifically exempted...
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from the definition of VOM) as applied each day on each coating operation.

B) If a control device or devices are used to control VOM emissions, control device monitoring data; a log of operating time for the capture system, control device, monitoring equipment and the associated coating operation; and a maintenance log for the capture system, control device and monitoring equipment, detailing all routine and non-routine maintenance performed including dates and duration of any outages.

3) On and after a date consistent with Section 219.106 of this Part or on and after the initial start-up date, the owner or operator of a subject coating operation shall determine and record the daily VOM emissions in kg (lbs) per 1 (gal) of coating solids deposited in accordance with the proposal submitted and approved pursuant to Section 219.204(a)(2) or (a)(3) of this Subpart within 10 days from the end of the month and maintain this information at the source for a period of three years.

4) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a subject coating operation shall notify the Agency in the following instances:

A) Any record showing a violation of Section 219.204(a)(2) or (a)(3) of this Subpart shall be reported by sending a copy of such record to the Agency within 15 days from the end of the month in which the violation occurred.

B) The owner or operator shall notify the Agency of any change to the operation at least 30 days before the change is effected. The Agency shall determine whether or not compliance testing is required. If the Agency determines that compliance testing is required, then the owner or operator shall submit a testing proposal to the Agency within 30 days and test within 30 days of the approval of the proposal by the Agency and USEPA.

4g) On and after a date consistent with Section 219.106(c) of this Part, or on and after the initial start-up date, whichever is later, the owner or operator of a flat wood
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paneling coating line subject to the requirements in Section 219.217 of this Subpart shall comply with the following:

1) By May 1, 2010, or upon initial start-up, whichever is later, submit a certification to the Agency that includes a description of the practices and procedures that the source will follow to ensure compliance with the applicable requirements in Sections 219.217(c) and 219.217(d) of this Subpart; and

2) Notify the Agency of any violation of Section 219.217 of this Subpart by providing a description of the violation and copies of records documenting such violation to the Agency within 30 days following the occurrence of the violation.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.212 Cross-Line Averaging to Establish Compliance for Coating Lines

a) On and after March 15, 1996, any owner or operator of a coating line subject to the limitations set forth in Section 219.204 of this Subpart, except coating lines subject to the limitations in Section 219.204(o) of this Subpart, and with coating lines in operation prior to January 1, 1991 ("pre-existing coating lines"), may, for pre-existing coating lines only, elect to comply with the requirements of this Section, rather than complying with the applicable emission limitations set forth in Section 219.204, if an operational change of the type described below has been made after January 1, 1991, to one or more pre-existing coating lines at the source. An operational change occurs when a pre-existing coating line is replaced with a line using lower VOM coating for the same purpose as the replaced line ("replacement line"). A source electing to rely on this Section to demonstrate compliance with the requirements of this Subpart shall operate pursuant to federally enforceable permit conditions approved by the Agency and USEPA.

b) An owner or operator of pre-existing coating lines subject to a VOM content limitation in Section 219.204 of this Subpart and electing to rely on this Section to demonstrate compliance with this Subpart must establish, by use of the equations in subsection (d) of this Section, that the calculated actual daily VOM emissions from all participating coating lines, as defined below, are less than the calculated daily allowable VOM emissions from the same group of coating lines. For any pre-existing coating line to be aggregated for the purposes of Section 219.212,
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219.213, or 219.214 of this Subpart ("participating coating lines"), the source must establish that:

1) All coatings applied on the participating coating line shall, at all times, have a VOM content less than or equal to the applicable VOM content limitation for such coating listed in Appendix H of this Part; and

2) On the date the source elects to rely on this Section to demonstrate compliance with this Subpart, all coatings applied on the participating coating line are not already in compliance with the VOM content limitation for such coating effective on or after March 15, 1996; or the participating coating line is a replacement line, as defined in subsection (a) of this Section with an operational change occurring on or after January 1, 1991.

c) Notwithstanding subsection (a) of this Section, any owner or operator of a coating line subject to the limitations set forth in Section 219.204 of this Subpart and electing to rely on this Section to demonstrate compliance with this Subpart, may also include as a participating coating line, until December 31, 1999, only, any replacement line that satisfies all of the following conditions:

1) The replacement line is operated as a powder coating line;

2) The replacement line was added after July 1, 1988; and

3) The owner or operator also includes as a participating coating line one or more coating lines that satisfy the criteria of a replacement line, as described in subsection (a) of this Section.

d) To demonstrate compliance with this Section, a source shall establish the following:

1) An alternative daily emission limitation shall be determined for all participating coating lines at the source according to subsection (d)(2) of this Section. All participating coating lines shall be factored in each day to demonstrate compliance. Provided compliance is established pursuant to the requirements in this subsection, nothing in this Section requires daily operation of each participating line. Actual daily emissions from all participating coating lines (E_d) shall never exceed the alternative daily
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emission limitation \((A_d)\) and shall be calculated by use of the following equation:

\[
E_d = \sum_{i=1}^{n} V_i C_i
\]

where:

\(E_d\) = Actual daily VOM emissions from participating coating lines in units of kg/day (lbs/day);

\(i\) = Subscript denoting a specific coating applied;

\(n\) = Total number of coatings applied by all participating coating lines at the source;

\(V_i\) = Volume of each coating applied for the day in units of 1/day (gal/day) of coating (minus water and any compounds which are specifically exempted from the definition of VOM); and

\(C_i\) = The VOM content of each coating as applied in units of kg VOM/1 (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM).

2) The alternative daily emission limitation \((A_d)\) shall be determined for all participating coating lines at the source on a daily basis as follows:

\[
A_d = A_i + A_p
\]

where \(A_i\) and \(A_p\) are defined in subsections (2)(A) and (2)(B) of this subsection.

A) The portion of the alternative daily emissions limitation for coating operations at a source using non-powder coating \((A_i)\) shall be determined for all such participating non-powder coating lines on a daily basis as follows:
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\[ A_i = \sum_{i=1}^{n} V_i L_i \left( \frac{D_i - C_i}{D_i - L_i} \right) \]

where:

\( A_i \) = The VOM emissions allowed for the day in units of kg/day (lbs/day);

\( i \) = Subscript denoting a specific coating applied;

\( n \) = Total number of coatings applied by all participating coating lines at the source;

\( C_i \) = The VOM content of each coating as applied in units of kg VOM/1 (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM);

\( D_i \) = The density of VOM in each coating applied. For the purposes of calculating \( A_i \), the density is 0.882 kg VOM/1 VOM (7.36 lbs VOM/gal VOM);

\( V_i \) = Volume of each coating applied for the day in units of 1 (gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM); and

\( L_i \) = The VOM emission limitation for each coating applied, as specified in Section 219.204 of this Subpart, in units of kg VOM/1 (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM).

B) The portion of the alternative daily emissions limitation for coating operations at a source using powdered coating (\( A_p \)) shall be determined for all such participating powder coating lines on a daily basis as follows:
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\[ A_i = \sum_{h=1}^{m} \sum_{j=1}^{n} \frac{V_j L_j D_j K_h}{(D_j - L_j)} \]

where:

- \( A_i \) = The VOM emissions allowed for the day in units of kg/day (lbs/day);
- \( h \) = Subscript denoting a specific powder coating line;
- \( j \) = Subscript denoting a specific powder coating applied:
- \( m \) = Total number of participating powder coating lines;
- \( n \) = Total number of powder coatings applied in the participating coating lines;
- \( D_j \) = The assumed density of VOM in liquid coating, 0.882 kg VOM/1 VOM (7.36 lbs VOM/gal VOM);
- \( V_j \) = Volume of each powder coating consumed for the day in units of 1 (gal) of coating;
- \( L_j \) = The VOM emission limitation for each coating applied, as specified in Section 219.204 of this Subpart, in units of kg VOM/1 (lbs VOM/gal) of coating (minus water and any compounds which are specifically exempted from the definition of VOM); and
- \( K \) = A constant for each individual coating line representing the ratio of the volume of coating solids consumed on the liquid coating system which has been replaced to the volume of powder coating consumed on the replacement line to accomplish the same coating job. This value shall be determined by the source based on tests conducted and records maintained pursuant to the requirements of Section 219.213 of this Subpart demonstrating the amount of coating solids consumed as both liquid and powder. Tests methods
and recordkeeping requirements shall be approved by the Agency and USEPA and contained in the source's operating permit as federally enforceable permit conditions, subject to the following restrictions:

i) \( K \) cannot exceed 0.9 for non-recycled powder coating systems; or

ii) \( K \) cannot exceed 2.0 for recycled powder coating systems.

(Source: Amended at 34 Ill. Reg. _______, effective ____________)

**Section 219.217 Wood Furniture Coating and Flat Wood Paneling Coating Work Practice Standards**

a) Spray booth cleaning. Each owner or operator of a source subject to the limitations of Section 219.204(1) of this Subpart shall not use compounds containing more than 8.0 percent, by weight, of VOM for cleaning spray booth components other than conveyors, continuous coaters and their enclosures, and metal filters, unless the spray booth is being refurbished. If the spray booth is being refurbished, that is, the spray booth coating or other material used to cover the booth is being replaced, the affected source shall use no more than 1.0 gallon of organic solvent to prepare the booth prior to applying the booth coating.

b) Application equipment requirements. No owner or operator of a source subject to the limitations of Section 219.204(1) of this Subpart shall use conventional air spray guns to apply coating materials to wood furniture except under the circumstances specified in subsections (b)(1) through (4) of this Section:

1) To apply coating materials that have a VOM content no greater than 1.0 kg VOM/kg solids (1.0 lb VOM/lb solids), as applied;

2) For repair coating under the following circumstances:

   A) The coating materials are applied after the completion of the coating operation; or
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B) The coating materials are applied after the stain and before any other type of coating material is applied, and the coating materials are applied from a container that has a volume of no more than 2.0 gallons;

3) If the spray gun is aimed and triggered automatically, rather than manually; or

4) If emissions from the finishing application station are directed to a control device pursuant to Section 219.216 of this Subpart.

cb) Cleaning and storage requirements. Each owner or operator of a source subject to the limitations of Section 219.204(l) or 219.204(o) of this Subpart shall:

1) Keep, store, and dispose of all coating, cleaning, and washoff materials in closed containers;

2) Pump or drain all organic solvent used for line cleaning into closed containers;

3) Collect all organic solvent used to clean spray guns in closed containers; and

4) Control emissions from washoff operations by using closed tanks.

d) Additional cleaning and storage requirements for flat wood paneling coating lines. Every owner or operator of a source subject to the limitations of Section 219.204(o) of this Subpart shall:

1) Minimize spills of VOM-containing coatings, thinners, and cleaning materials and clean up spills immediately;

2) Minimize emissions of VOM during the cleaning of storage, mixing, and conveying equipment; and

3) Keep mixing vessels that contain VOM-containing coatings and other VOM-containing materials closed except when specifically in use.

e) Application equipment requirements. No owner or operator of a source subject to
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the limitations of Section 219.204(I) of this Subpart shall use conventional air spray guns to apply coating materials to wood furniture except under the circumstances specified in subsections (c)(1) through (4) of this Section:

1) To apply coating materials that have a VOM content no greater than 1.0 kg VOM/kg solids (1.0 lb VOM/lb solids), as applied;

2) For repair coating under the following circumstances:
   A) The coating materials are applied after the completion of the coating operation; or
   B) The coating materials are applied after the stain and before any other type of coating material is applied, and the coating materials are applied from a container that has a volume of no more than 2.0 gallons;

3) If the spray gun is aimed and triggered automatically, rather than manually; or

4) If emissions from the finishing application station are directed to a control device pursuant to Section 219.216 of this Subpart.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

SUBPART H: PRINTING AND PUBLISHING

Section 219.401 Flexographic and Rotogravure Printing

a) No owner or operator of a subject flexographic, packaging rotogravure or publication rotogravure printing line shall apply at any time any coating or ink unless the VOM content does not exceed the limitation specified in either subsection (a)(1) or (a)(2) below, as applicable. Compliance with this Section must be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 219.105(a) and the recordkeeping and reporting requirements specified in Section 219.404(c) of this Part. As an alternative to compliance with this subsection, a subject printing line may meet the requirements of subsection (b) or (c) below.
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1) Prior to May 1, 2010, either:

A) Forty percent VOM by volume of the coating and ink (minus water and any compounds which are specifically exempted from the definition of VOM); or

B2) Twenty-five percent VOM by volume of the volatile content in the coating and ink; and,

2) On and after May 1, 2010:

A) For owners or operators of flexographic or rotogravure printing lines that do not print flexible packaging, either:

i) Forty percent VOM by volume of the coating and ink (minus water and any compounds that are specifically exempted from the definition of VOM); or

ii) Twenty-five percent VOM by volume of the volatile content in the coating and ink;

B) For owners or operators of flexographic or rotogravure printing lines that print flexible packaging, or that print flexible packaging and non-flexible packaging on the same line, either:

i) 0.8 kg VOM/kg (0.8 lbs VOM/lb) solids applied; or

ii) 0.16 kg VOM/kg (0.16 lbs VOM/lb) inks and coatings applied.

b) Weighted averaging alternative.

1) Prior to May 1, 2010, no owner or operator of a subject flexographic; packaging rotogravure; or publication rotogravure printing line shall apply coatings or inks on the subject printing line unless the weighted average, by volume. VOM content of all coatings and inks as applied each day on the subject printing line does not exceed the limitation specified in either subsection (a)(1)(A) (as determined by subsection (b)(1)(A)) or subsection (a)(12)(B) (as determined by subsection (b)(12)(B) of this Section).
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Compliance with this subsection must be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 219.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 219.404(d) of this Part.

A1) The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(1)(A) of this Section.

\[
V_{OM_{(i)(A)}} = \frac{\sum_{i=1}^{n} C_i L_i (V_{si} + V_{OMi})}{\sum_{i=1}^{n} L_i (V_{si} + V_{OMi})}
\]

where:

\(V_{OM_{(i)(A)}}\) = The weighted average VOM content in units of percent VOM by volume of all coatings and inks (minus water and any compounds which are specifically exempted from the definition of VOM) used each day;

\(i\) = Subscript denoting a specific coating or ink as applied;

\(n\) = The number of different coatings and/or inks as applied each day on a printing line;

\(C_i\) = The VOM content in units of percent VOM by volume of each coating or ink as applied (minus water and any compounds which are specifically exempted from the definition of VOM);

\(L_i\) = The liquid volume of each coating or ink as applied in units of l (gal);

\(V_{si}\) = The volume fraction of solids in each coating or ink as applied;
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\( V_{VOMi} \) = The volume fraction of VOM in each coating or ink as applied.

\( B2) \) The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(12)(B) of this Section.

\[
V_{om(i)(B)} = \frac{\sum_{i=1}^{n} C_i L_i V_{MI}}{\sum_{i=1}^{n} L_i V_{MI}}
\]

where:

\( VOM_{(i)(B)} \) = The weighted average VOM content in units of percent VOM by volume of the volatile content of all coatings and inks used each day;

\( i \) = Subscript denoting a specific coating or ink as applied;

\( n \) = The number of different coatings and/or inks as applied each day on a printing line;

\( C_i \) = The VOM content in units of percent VOM by volume of the volatile matter in each coating or ink as applied;

\( L_i \) = The liquid volume of each coating or ink as applied in units of \( 1 \) (gal);

\( V_{MI} \) = The volume fraction of volatile matter in each coating or ink as applied.

\( 2) \) On and after May 1, 2010, no owner or operator of a subject flexographic or rotogravure printing line that does not print flexible packaging shall apply coatings or inks on the subject printing line unless the weighted average, by weight, VOM content of all coatings and inks as applied each day on the subject printing line does not exceed the limitation specified in
either subsection (a)(2)(A)(i) (calculated in accordance with the equation in subsection (b)(1)(A)) or subsection (a)(2)(A)(ii) (calculated in accordance with the equation in subsection (b)(1)(B)) of this Section.

Compliance with this subsection (b)(2) shall be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 219.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 219.404(d) of this Subpart.

3) On and after May 1, 2010, no owner or operator of a subject flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, shall apply coatings or inks on the subject printing line unless the weighted average, by weight, VOM content of all coatings and inks as applied each day on the subject printing line does not exceed the limitation specified in either subsection (a)(2)(B)(i) (calculated in accordance with the equation in subsection (b)(3)(A)) or subsection (a)(2)(B)(ii) (calculated in accordance with the equation in subsection (b)(3)(B)) of this Section.

Compliance with this subsection (b)(3) shall be demonstrated through the applicable coating or ink analysis test methods and procedures specified in Section 219.105(a) of this Part and the recordkeeping and reporting requirements specified in Section 219.404(d) of this Subpart.

A) The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(2)(B)(i) of this Section.

\[
Vom_{(A)} = \frac{\sum_{i=1}^{n} C_i W_i}{\sum_{i=1}^{n} W_i}
\]

where:

\[
VOM_{(A)} = \text{The weighted average VOM content in units of kg VOM per kg (lbs VOM per lb) solids of all coatings and inks used each day;}
\]
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\[ i \quad \text{= Subscript denoting a specific coating or ink as applied;} \]

\[ n \quad \text{= The number of different coatings and/or inks as applied each day on a printing line;} \]

\[ C_i \quad \text{= The VOM content in units of kg VOM per kg (lbs VOM per lb) solids of each coating or ink as applied;} \]

\[ W_i \quad \text{= Weight of solids in each coating or ink, as applied, in units of kg/l (lb/gal).} \]

\[ B) \quad \text{The following equation shall be used to determine if the weighted average VOM content of all coatings and inks as applied each day on the subject printing line exceeds the limitation specified in subsection (a)(2)(B)(ii) of this Section.} \]

\[ Vom_{(B)} = \frac{\sum_{i=1}^{n} C_i L_i}{\sum_{i=1}^{n} L_i} \]

where:

\[ VOM_{(B)} \quad \text{= The weighted average VOM content in units of kg (lbs) VOM per weight in kg (lbs) of all coatings or inks as applied each day;} \]

\[ i \quad \text{= Subscript denoting a specific coating or ink as applied;} \]

\[ n \quad \text{= The number of different coatings and/or inks as applied each day on each printing line;} \]

\[ C_i \quad \text{= The VOM content in units of kg (lbs) VOM per weight in kg (lbs) of each coating or ink as applied;} \]

\[ L_i \quad \text{= The weight of each coating or ink, as applied, in units of kg/l (lb/gal).} \]
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c) Capture System and Control Device Requirements.

1) Prior to May 1, 2010, no owner or operator of a subject flexographic, packaging rotogravure, or publication rotogravure printing line equipped with a capture system and control device shall operate the subject printing line unless the owner or operator meets the requirements in subsection (c)(1)(A), (c)(1)(B)(2), or (c)(1)(C), as well as subsections (c)(1)(D)(4), (c)(5), and (c)(6) below.

A) One of:

i) A carbon adsorption system is used that reduces the captured VOM emissions by at least 90 percent by weight,

ii) An incineration system is used that reduces the captured VOM emissions by at least 90 percent by weight,

iii) An alternative VOM emission reduction system is used that is demonstrated to have at least a 90 percent control device efficiency, approved by the Agency and approved by USEPA as a SIP revision,

B) The printing line is equipped with a capture system and control device that provides an overall reduction in VOM emissions of at least:

i) 75 percent where a publication rotogravure printing line is employed, or

ii) 65 percent where a packaging rotogravure printing line is employed, or

iii) 60 percent where a flexographic printing line is employed, and

2) On and after May 1, 2010, no owner or operator of a flexographic or rotogravure printing line that does not print flexible packaging and that is
equipped with a capture system and control device shall operate the subject printing line unless the owner or operator meets the requirements in subsection (c)(1)(A), (c)(1)(B), or (c)(1)(C), as well as subsections (c)(1)(D), (c)(5), and (c)(6) of this Section;

3) On and after May 1, 2010, no owner or operator of a flexographic or rotogravure printing line that prints flexible packaging and that is equipped with a capture system and control device shall operate the subject printing line unless the owner or operator meets the requirements in subsections (c)(5) and (c)(6) of this Section and the capture system and control device provides an overall reduction in VOM emissions of at least:

A) 65 percent in cases in which a subject printing line was first constructed at the subject source prior to March 14, 1995 and utilizes a control device that was first constructed at the subject source prior to January 1, 2010; or

B) 70 percent when a subject printing line was first constructed at the subject source prior to March 14, 1995 and utilizes a control device that was first constructed at the subject source on or after January 1, 2010; or

C) 75 percent when a subject printing line was first constructed at the subject source on or after March 14, 1995 and utilizes a control device that was first constructed at the subject source prior to January 1, 2010; or

D) 80 percent when a subject printing line was first constructed at the subject source on or after March 14, 1995 and utilizes a control device that was first constructed at the subject source on or after January 1, 2010;

4) On and after May 1, 2010, the owner or operator of a flexographic or rotogravure printing line that prints flexible packaging and non-flexible packaging on the same line and that is equipped with a control device shall be subject to the requirements of either subsection (c)(1)(D) or subsection (c)(3) of this Section, whichever is more stringent, as well as subsections (c)(5) and (c)(6) of this Section;
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5) The control device is equipped with the applicable monitoring equipment specified in Section 219.105(d)(2) of this Part and, except as provided in Section 219.105(d)(3) of this Part, the monitoring equipment is installed, calibrated, operated and maintained according to vendor specifications at all times the control device is in use, and

6) The capture system and control device are operated at all times when the subject printing line is in operation. The owner or operator shall demonstrate compliance with this subsection by using the applicable capture system and control device test methods and procedures specified in Section 219.105(c) of this Part through Section 219.105(f) of this Part and by complying with the recordkeeping and reporting requirements specified in Section 219.404(e) of this Part. The owner or operator of a printing line subject to the requirements in Section 219.401(c)(2) or 219.401(c)(1)(D) of this Section that performed all testing necessary to demonstrate compliance with Section 219.401(c)(1)(D) prior to May 1, 2010, is not required to retest pursuant to this subsection (c)(6). The owner or operator of a printing line subject to the requirements in Section 219.401(c)(3) shall perform testing in compliance with this subsection (c)(6), even if the owner or operator already performed such testing prior to May 1, 2010, unless the following conditions are met. Nothing in this subsection (c)(6), however, shall limit the Agency’s ability to require that the owner or operator perform testing pursuant to 35 Ill. Adm. Code 201.282:

A) On or after May 1, 2000, the owner or operator of the subject printing line performed all testing necessary to demonstrate compliance with Section 219.401(c)(1)(D);

B) Such testing also demonstrated an overall control efficiency equal to or greater than the applicable control efficiency requirements in Section 219.401(c)(3);

C) The owner or operator submitted the results of such tests to the Agency, and the tests were not rejected by the Agency;

D) The same capture system and control device subject to the tests referenced in subsection (c)(6)(A) of this Section is still being used by the subject printing line; and
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E) The owner or operator complies with all recordkeeping and reporting requirements in Section 219.404(e)(1)(B).

d) No owner or operator of subject flexographic or rotogravure printing lines that print flexible packaging or print flexible packaging and non-flexible packaging on the same line shall cause or allow VOM containing cleaning materials, including used cleaning towels, associated with the subject flexographic or rotogravure printing lines to be kept, stored, or disposed of in any manner other than in closed containers, or conveyed from one location to another in any manner other than in closed containers or pipes, except when specifically in use.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.402 Applicability

a) Except as otherwise provided in Section 219.401, the limitations of Section 219.401 of this Subpart apply to all flexographic and rotogravure printing lines at a subject source. All sources with flexographic and/or rotogravure printing lines are subject sources unless:

1) Total maximum theoretical emissions of VOM from all flexographic and rotogravure printing lines (including solvents used for cleanup operations associated with flexographic and rotogravure printing lines), at the source never exceed 90.7 Mg (100 tons) per calendar year before the application of capture systems and control devices, or

2) A federally enforceable permit or SIP revision for all flexographic and rotogravure printing lines at a source requires the owner or operator to limit production or capacity of these printing lines to reduce total VOM emissions from all flexographic and rotogravure printing lines to 90.7 Mg (100 tons) or less per calendar year before the application of capture systems and control devices.

b) The limitations of Section 219.401(d) shall apply to all owners or operators of flexographic or rotogravure printing line(s) that print flexible packaging, or that print flexible packaging and non-flexible packaging on the same line, at a source where the combined emissions of VOM from all flexographic and rotogravure printing lines total 6.8 kg/day (15 lbs/day) or more (including solvents used for
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cleanup operations associated with flexographic and rotogravure printing line(s), in the absence of air pollution control equipment.

cb) Upon achieving compliance with this Subpart, the flexographic and rotogravure printing lines are not required to meet Subpart G (Sections 219.301 or 219.302 of this Part). Flexographic and rotogravure printing lines exempt from this Subpart are subject to Subpart G (Sections 219.301 or 219.302 of this Part). Rotogravure or flexographic equipment used for both roll printing and paper coating is subject to this Subpart.

dc) Once subject to the limitations of Section 219.401 of this Part, a flexographic or rotogravure printing line is always subject to the limitations of Section 219.401 of this Part.

dc) Any owner or operator of any flexographic or rotogravure printing line that is exempt from any of the limitations of Section 219.401 of this Part because of the criteria in this Section is subject to the recordkeeping and reporting requirements specified in Section 219.404(b) and (f) of this Part, as applicable.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.403 Compliance Schedule

Every owner or operator of a flexographic and/or rotogravure printing line shall comply with the applicable requirements of Section 219.401 and Section 219.404 of this Part in accordance with the applicable compliance schedule specified in subsection (a), (b), (c), or (d), (e), (f), or (g) below:

a) No owner or operator of a flexographic or rotogravure printing line that which is exempt from the limitations of Section 219.401 of this Part because of the criteria in Section 219.402(a) of this Part shall operate said printing line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 219.404(b) of this Part.

b) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 219.401(a)(1) of this Part shall operate said printing line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 219.404(b) of this Part and Section 219.404(c) of this Part.
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c) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 219.401(b)(1) of this Part shall operate said printing line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Section 219.401(b)(1) and Section 219.404(d) of this Part.

d) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 219.401(c)(1)(D) of this Part shall operate said printing line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, the applicable provisions in Sections 219.401(c) and 219.404(e) of this Part.

e) No owner or operator of a flexographic or rotogravure printing line complying by means of Section 219.401(a)(2), (b)(2), or (b)(3) or complying by means of Section 219.401(c)(2), (c)(3), or (c)(4), shall operate the printing line on or after May 1, 2010, unless the owner or operator has complied with, and continues to comply with, Section 219.401(a)(2), (b)(2) or (b)(3), and Section 219.401(c), as applicable, and all applicable provisions in Section 219.404 of this Part.

f) No owner or operator of a flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, shall operate the printing line on or after May 1, 2010, unless the owner or operator has complied with, and continues to comply with, Section 219.401(d) and Section 219.404(g) of this Part.

g) No owner or operator of a flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, and that is exempt from the limitations of Section 219.401(d) because of the criteria in Section 219.402(b) of this Part shall operate the printing line on or after May 1, 2010, unless the owner or operator has complied with, and continues to comply with, Section 219.402(b) and Section 219.404(f) of this Part.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.404  Recordkeeping and Reporting

a) The VOM content of each coating and ink and the efficiency of each capture system and control device shall be determined by the applicable test methods and
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procedures specified in Section 219.105 of this Part to establish the records required under this Section.

b) Any owner or operator of a printing line which is exempted from any of the limitations of Section 219.401 of this Part because of the criteria in Section 219.402(a) of this Part shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or, for flexographic or rotogravure printing lines that print flexible packaging or that print flexible packaging and non-flexible packaging on the same line, by May 1, 2010, the owner or operator of a flexographic and rotogravure printing line to which this subsection (b) is applicable shall certify to the Agency that the flexographic and rotogravure printing line is exempt under the provisions of Section 219.402(a) of this Part. Such certification shall include:

A) A declaration that the flexographic and rotogravure printing line is exempt from the limitations of the criteria in Section 219.401 because of Section 219.402(a) of this Part;

B) Calculations which demonstrate that total maximum theoretical emissions of VOM from all flexographic and rotogravure printing lines at the source never exceed 90.7 Mg (100 tons) per calendar year before the application of capture systems and control devices. Total maximum theoretical emissions of VOM for a flexographic or rotogravure printing source is the sum of maximum theoretical emissions of VOM from each flexographic and rotogravure printing line at the source. The following equation shall be used to calculate total maximum theoretical emissions of VOM per calendar year before the application of capture systems and control devices for each flexographic and rotogravure printing line at the source:

\[ E_p = A \times B + 1095 \times D \times F \]

where:

\[ E_p = \] Total maximum theoretical emissions of VOM from one flexographic or rotogravure printing line in units of kg/year
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(lbs/year);

A = Weight of VOM per volume of solids of the coating or ink with the highest VOM content as applied each year on the printing line in units of kg VOM/l (lbs VOM/gal) of coating or ink solids;

B = Total volume of solids for all coatings and inks that can potentially be applied each year on the printing line in units of 1/year (gal/year). The instrument and/or method by which the owner or operator accurately measured or calculated the volume of each coating and ink as applied and the amount that can potentially be applied each year on the printing line shall be described in the certification to the Agency;

C = Weight of VOM per volume of material for the cleanup material or solvent with the highest VOM content as used each year on the printing line in units of kg/l (lbs VOM/gal) of such material;

D = The greatest volume of cleanup material or solvent used in any 8-hour period;

F = The highest fraction of cleanup material or solvent which is not recycled or recovered for offsite disposal during any 8-hour period.

2) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a facility referenced in this subsection shall collect and record all of the following information each year for each printing line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content and the volume of each coating and ink as applied each year on each printing line.

3) On and after a date consistent with Section 219.106 of this Part, the owner
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or operator of a facility exempted from the limitations of Section 219.401 of this Part because of the criteria in Section 219.402(a) of this Part shall notify the Agency of any record showing that total maximum theoretical emissions of VOM from all printing lines exceed 90.7 Mg (100 tons) in any calendar year before the application of capture systems and control devices by sending a copy of such record to the Agency within 30 days after the exceedance occurs.

c) Any owner or operator of a printing line subject to the limitations of Section 219.401 of this Part and complying by means of Section 219.401(a) of this Part shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or upon initial start-up of a new printing line, or upon changing the method of compliance from an existing subject printing line from Section 219.401(b) or Section 219.401(c) to Section 219.401(a) of this Part, the owner or operator of a subject printing line shall certify to the Agency that the printing line will be in compliance with Section 219.401(a) of this Part on and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or on and after the initial start-up date. The owner or operator of a printing line subject to the requirements in Section 219.401(a)(2)(B) shall certify in accordance with this subsection (c)(1) even if the owner or operator of such line submitted a certification prior to January 1, 2010. Such certification shall include:

A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content of each coating and ink as applied each day on each printing line.

2) On and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or on and after the initial start-up date, the owner or operator of a printing line subject to the limitations of Section 219.401 of this Part and complying by means of Section 219.401(a) of this Part shall collect and record all of the following information each day for each coating line and maintain the information at the source for a period of three years:
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A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content of each coating and ink as applied each day on each printing line.

3) On and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, the owner or operator of a subject printing line shall notify the Agency in the following instances:

A) Any record showing violation of Section 219.401(a) of this Part shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with Section 219.401 of this Part from Section 219.401(a) to Section 219.401(b) or (c) of this Part, the owner or operator shall comply with all requirements of subsection (d)(1) or (e)(1) of this Section, respectively. Upon changing the method of compliance with Section 219.401 of this Part from Section 219.401(a) to Section 219.401(b) or (c) of this Part, the owner or operator shall comply with all requirements of subsection (d) or (e) of this Section, respectively.

d) Any owner or operator of a printing line subject to the limitations of Section 219.401 of this Part and complying by means of Section 219.401(b) of this Part shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing subject printing line from Section 219.401(a) or (c) to Section 219.401(b) of this Part, the owner or operator of the subject printing line shall certify to the Agency that the printing line will be in compliance with Section 219.401(b) of this Part on and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, on and after the initial start-up date. The owner or operator of a printing line subject to the requirements in Section 219.401(b)(3) shall certify in accordance with this subsection (d)(1) even if the owner or operator of such line submitted a certification prior to
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January 1, 2010. Such certification shall include:

A) The name and identification number of each printing line which will comply by means of Section 219.401(b) of this Part.

B) The name and identification number of each coating and ink available for use on each printing line.

C) The VOM content of each coating and ink as applied each day on each printing line.

D) The instrument or method by which the owner or operator will accurately measure or calculate the volume, or weight of solids, as applicable, of each coating and ink as applied each day on each printing line.

E) The method by which the owner or operator will create and maintain records each day as required in subsection (d)(2) of this Section.

F) An example of the format in which the records required in subsection(d)(2) of this Section will be kept.

2) On and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or on and after the initial start-up date, the owner or operator of a printing line subject to the limitations of Section 219.401 and complying by means of Section 219.401(b) of this Part shall collect and record all of the following information each day for each printing line and maintain the information at the source for a period of three years:

A) The name and identification number of each coating and ink as applied on each printing line.

B) The VOM content and the volume, or weight of solids, as applicable, of each coating and ink as applied each day on each printing line.

C) The daily-weighted average VOM content of all coatings and inks
3) On and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, the owner or operator of a subject printing line shall notify the Agency in the following instances:

A) Any record showing violation of Section 219.401(b) of this Part shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with Section 219.401 of this Part from Section 219.401(b) to Section 219.401(a) or 219.401(c) of this Part, the owner or operator shall comply with all requirements of subsection (c)(1) or (e)(1) of this Section, respectively. Upon changing the method of compliance with Section 219.401 of this Part from Section 219.401(b) to Section 219.401(a) or (c) of this Part, the owner or operator shall comply with all requirements of subsection (c) or (e) of this Section, respectively.

e) Any owner or operator of a printing line subject to the limitations of Section 219.401 of this Part and complying by means of Section 219.401(c) of this Part shall comply with the following:

1) By a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing printing line from Section 219.401(a) or (b) to Section 219.401(c) of this Part, the owner or operator of the subject printing line shall either:

A) Perform all tests and submit to the Agency the results of all tests and calculations necessary to demonstrate that the subject printing line will be in compliance with Section 219.401(c) of this Part on and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or on and after the initial start-up date; or

B) If not required to perform such testing pursuant to Section 219.401(c)(6), submit a certification to the Agency that includes:
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i) A declaration that the owner or operator is not required to perform testing pursuant to Section 219.401(c)(6);

ii) The dates that testing demonstrating compliance with Section 219.401(c)(3) was performed; and

iii) The dates that the results of such testing were submitted to the Agency.

2) On and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, or on and after the initial start-up date, the owner or operator of a printing line subject to the limitations of Section 219.401 of this Part and complying by means of Section 219.401(c) of this Part shall collect and record all of the following information each day for each printing line and maintain the information at the facility for a period of three years:

A) Control device monitoring data.

B) A log of operating time for the capture system, control device, monitoring equipment and the associated printing line.

C) A maintenance log for the capture system, control device and monitoring equipment detailing all routine and non-routine maintenance performed including dates and duration of any outages.

3) On and after a date consistent with Section 219.106 of this Part, or Section 219.403(e), as applicable, the owner or operator of a subject printing line shall notify the Agency in the following instances:

A) Any record showing violation of Section 219.401(c) of this Part shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation.

B) At least 30 calendar days before changing the method of compliance with Section 219.401 of this Part from Section 219.401(c) to Section 219.401(a) or (b) of this Part, the owner or
operator shall comply with all requirements of subsection (c)(1) or (d)(1) of this Section, respectively. Upon changing the method of compliance with Section 219.401 of this Part from Section 219.401(c) to Section 219.401(a) or (b) of this Part, the owner or operator shall comply with all requirements of subsection (c) or (d) of this Section, respectively.

4) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, the owner or operator of a printing line subject to the requirements in Section 219.401(c)(3) or (c)(4) shall submit to the Agency records documenting the date the printing line was constructed at the subject source and the date the control device for such printing line was constructed at the subject source.

f) Any owner or operator of a flexographic or rotogravure printing line that prints flexible packaging, or that prints flexible packaging and non-flexible packaging on the same line, and that is exempt from the limitations of Section 219.401(d) because of the criteria in Section 219.402(b) shall:

1) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, and upon modification of a printing line, submit a certification to the Agency that includes:

A) A declaration that the source is exempt from the requirements in Section 219.401(d) because of the criteria in Section 219.402(b);

B) Calculations that demonstrate that combined emissions of VOM from all flexographic and rotogravure printing lines (including inks and solvents used for cleanup operations associated with such printing lines) at the source never equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment; and

2) Notify the Agency in writing if the combined emissions of VOM from all flexographic and rotogravure printing lines (including inks and solvents used for cleanup operations associated with the flexographic and rotogravure lines) at the source ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, within 30 days after the event occurs.
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**g)** Any owner or operator of a printing line subject to the limitations of Section 219.401(d) shall:

1) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, submit a certification to the Agency describing the practices and procedures that the owner or operator will follow to ensure compliance with the limitations of Section 219.401(d); and

2) Notify the Agency of any violation of Section 219.401(d) by sending a description of the violation and copies of records documenting such violations to the Agency within 30 days following the occurrence of the violation.

**h)** All records required by subsections (f) and (g) of this Section shall be retained for at least three years and shall be made available to the Agency upon request.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

**Section 219.405 Lithographic Printing: Applicability**

**a)** Until March 15, 1996, the limitations of Section 219.406 of this Subpart apply to all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with the heatset web offset lithographic printing line(s)) at a source subject to the requirements of this Subpart. All sources with heatset web offset lithographic printing lines are sources subject to the requirements of this Subpart unless:

1) Total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with the heatset web offset lithographic printing line(s)) at the source never exceed 90.7 Mg (100 tons) per calendar year in the absence of air pollution control equipment; or

2) A federally enforceable permit or SIP revision for all heatset web offset lithographic printing line(s) at a source requires the owner or operator to limit production or capacity of these printing line(s) to reduce total VOM emissions from all heatset web offset lithographic printing line(s) to 90.7 Mg (100 tons) per calendar year or less in the absence of air pollution control equipment.
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b) Any owner or operator of any heatset web offset lithographic printing line that is exempt from the limitations in Section 219.406 of this Subpart because of the criteria in subsection (a) of this Section shall be subject to the recordkeeping and reporting requirements in Section 219.406(b)(1) of this Subpart.

e) Every owner or operator of lithographic printing line(s) is subject to the recordkeeping and reporting requirements in Section 219.411 of this Subpart.

bd) Prior to May 1, 2010, On and after March 15, 1996, Sections 219.407 through 219.410 of this Subpart shall apply to:

1) All owners or operators of heatset web offset lithographic printing line(s) unless:

   A) Total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with heatset web offset lithographic printing lines) at the source never exceed 90.7 Mg (100 tons) per calendar year before the application of capture systems and control devices. To determine a source's total maximum theoretical emissions of VOM for the purposes of this subsection, the owner or operator shall use the calculations set forth in Section 219.411(a)(1)(C) of this Subpart; or

   B) Federally enforceable permit conditions or SIP revision for all heatset web offset lithographic printing line(s) at the source requires the owner or operator to limit production or capacity of these printing line(s) to total VOM emissions of 90.7 Mg/yr (100 TPY) or less, before the application of capture systems and control devices;

2) All owners or operators of heatset web offset, non-heatset web offset, or sheet-fed offset lithographic printing line(s), unless the combined emissions of VOM from all lithographic printing line(s) at the source (including solvents used for cleanup operations associated with the lithographic printing line(s)) never exceed 45.5 kg/day (100 lbs/day), as determined in accordance with Section 219.411(a)(1)(B), before the
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application of capture systems and control devices.

c) On and after May 1, 2010:

1) The requirements in Section 219.407(a)(1)(B) through (a)(1)(E) and 219.407(b) and all applicable provisions in Sections 219.409 through 219.411 of this Subpart shall apply to all owners or operators of heatset web offset lithographic printing lines, if the combined emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) ever exceed 45.5 kg/day (100 lbs/day), calculated in accordance with Section 219.411(b)(2)(B), before the application of capture systems and control devices;

2) The requirements in Section 219.407(a)(1)(A) and 219.407(a)(2) through (a)(5) and all applicable provisions in Sections 219.409 through 219.411 of this Subpart shall apply to all owners or operators of lithographic printing lines if the combined emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) ever equal or exceed 6.8 kg/day (15 lbs/day), calculated in accordance with Section 219.411(b)(1)(B), before the application of capture systems and control devices;

3) Notwithstanding subsection (c)(2) of this Section, at sources where the combined emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) equal or exceed 6.8 kg/day (15 lbs/day) but do not exceed 45.5 kg/day (100 lbs/day), calculated in accordance with Section 219.411(b)(1)(B), before the application of capture systems and control devices, the following exclusions shall apply unless the owner or operator of the source certifies pursuant to Section 219.411(g)(1)(B) that the source will not make use of any such exclusions:

A) The requirements of Section 219.407(a)(1)(A), 219.407(a)(2), and 219.407(a)(3) of this Subpart shall not apply to lithographic printing lines with a total fountain solution reservoir of less than 3.8 liters (1 gallon);
B) The requirements of Section 219.407(a)(3) of this Subpart shall not apply to sheet-fed offset lithographic printing lines with maximum sheet size of 11x17 inches or smaller;

C) The requirements of Section 219.407(a)(4) of this Subpart shall not apply to up to a total of 416.3 liters (110 gallons) per year of cleaning materials used on all lithographic printing lines at the source;

D) The requirements of Section 219.407(a)(4)(A)(i) shall not apply to lithographic printing lines at the source. Instead, the requirements of Section 219.407(a)(4)(A)(ii) shall apply to such lines.

d) If a lithographic printing line at a source is or becomes subject to one or more of the limitations in Section 219.406 or 219.407 of this Subpart, the lithographic printing lines at the source are always subject to the applicable provisions of this Subpart.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)


a) Emission Standards and Limitations. No owner or operator of a heatset web offset printing line at a source that meets or exceeds the applicability levels in Section 219.405(a) of this Subpart may cause or allow the operation of such heatset web offset printing line(s) unless the owner or operator meets the requirements in subsections (a)(1) or (a)(2) of this Section and the requirements in subsections (a)(3) and (a)(4) of this Section. The owner or operator shall demonstrate compliance with this Section by using the applicable test methods and procedures specified in Section 219.105(a), (d), and (f) of this Part and by complying with the recordkeeping and reporting requirements specified in subsection (b) of this Section.

1) An afterburner system is installed and operated that reduces 90 percent of the VOM emissions (excluding methane and ethane) from the dryer exhaust; or

2) The fountain solution contains no more than 8 percent, by weight, of
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VOM and a condensation recovery system is installed and operated that removes at least 75 percent of the non-isopropyl alcohol organic materials from the dryer exhaust; and

3) The control device is equipped with the applicable monitoring equipment specified in Section 219.105(d)(2) of this Part and the monitoring equipment is installed, calibrated, operated and maintained according to manufacturer's specifications at all times when the control device is in use; and

4) The control device is operated at all times when the printing line is in operation.

b) Recordkeeping and Reporting—The VOM content of each fountain solution and ink and the efficiency of each control device shall be determined by the applicable test methods and procedures specified in Section 219.105 of this Part to establish the records required under this subsection.

1) Any owner or operator of a lithographic printing line which is exempted from the limitations of subsection (a) of this Section because of the criteria in 219.405(a) of this Subpart shall comply with the following:

A) By a date consistent with Section 219.106 of this Part, the owner or operator of a heatset web offset lithographic printing line to which subsection (b)(1) of this Section is applicable shall certify to the Agency that the heatset web offset lithographic printing line is exempt under the provisions of Section 219.405(a) of this Subpart. Such certification shall include:

i) A declaration that the heatset web offset lithographic printing line is exempt from the limitations of subsection (a) of this Section because of the criteria in Section 219.405(a) of this Subpart; and

ii) Calculations which demonstrate that total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines at the source never exceed 90.7 Mg (100 tons) per calendar year before the application of air pollution control equipment. Total maximum theoretical
emissions of VOM for a heatset web offset lithographic printing source is the sum of maximum theoretical emissions of VOM from each heatset web offset lithographic printing line at the source. The following equation shall be used to calculate total maximum theoretical emissions of VOM per calendar year in the absence of air pollution control equipment for each heatset web offset lithographic printing line at the source:

\[ E_p = (R \times A \times B) + (C \times D) + 1095 \times (F \times G \times H) \]

where:

- \( E_p \) = Total maximum theoretical emissions of VOM from one heatset web offset printing line in units of kg/yr (lb/yr);
- \( A \) = Weight of VOM per volume of solids of ink with the highest VOM content as applied each year on the printing line in units of kg/l (lb/gal) of solids;
- \( B \) = Total volume of solids for all inks that can potentially be applied each year on the printing line in units of 1/yr (gal/yr). The instrument or method by which the owner or operator accurately measured or calculated the volume of each ink applied and the amount that can potentially be applied each year on the printing line shall be described in the certification to the Agency;
- \( C \) = Weight of VOM per volume of fountain solution with the highest VOM content as applied each year on the printing line in units of kg/l (lb/gal);
- \( D \) = The total volume of fountain solution that can potentially be used each year on the printing line in units of 1/yr (gal/yr). The instrument and/or method by which the owner or operator accurately measured or calculated the volume of each fountain solution used and the amount that can potentially be used each year on the printing line shall be described in the certification to the Agency;
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\[ F = \text{Weight of VOM per volume of material for the cleanup material or solvent with the highest VOM content as used each year on the printing line in units of kg/L (lb/gal) of such material;} \]

\[ G = \text{The greatest volume of cleanup material or solvent used in any 8-hour period; and} \]

\[ H = \text{The highest fraction of cleanup material or solvent which is not recycled or recovered for offsite disposal during any 8-hour period.} \]

\[ R = \text{The multiplier representing the amount of VOM not retained in the substrate being used. For paper, } R = 0.8. \text{ For foil, plastic, or other impervious substrates, } R = 1.0. \]

B) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a heatset web offset lithographic printing line to which subsection (b)(1) of this Section is applicable shall collect and record all of the following information each year for each printing line and maintain the information at the source for a period of three years:

i) The name and identification of each fountain solution and ink as applied on each printing line; and

ii) The VOM content and the volume of each fountain solution and ink as applied each year on each printing line.

C) On and after a date consistent with Section 219.106 of this Part, the owner or operator of a source exempted from the limitations of subsection (a) of this Section because of the criteria in Section 219.405(a) of this Subpart shall notify the Agency of any record showing that total maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines exceed 90.7 Mg (100 tons) in any calendar year in the absence of air pollution control equipment by sending a copy of such record to the Agency within 30 days after the exceedence occurs.

2) Any owner or operator of a printing line subject to the limitations of subsection (a) of this Section and complying by means of subsection (a)(1)
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of this Section shall comply with the following:

A) By a date consistent with Section 219.106 of this Part, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing printing line from subsection (a)(2) to (a)(1) of this Section, perform all tests and submit to the Agency the results of all tests and calculations necessary to demonstrate that the subject printing line will be in compliance with subsection (a)(1) of this Section on and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date;

B) On and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date, collect and record the following information each day for each printing line and maintain the information at the source for a period of three years:
   i) Control device monitoring data;
   ii) A log of operating time for the control device, monitoring equipment and the associated printing line; and
   iii) A maintenance log for the control device and monitoring equipment detailing all routine and non-routine maintenance performed including dates and duration of any outages;

C) On and after a date consistent with Section 219.106 of this Part, notify the Agency in the following instances:
   i) Any violation of subsection (a)(1) of this Section shall be reported to the Agency, in writing, within 30 days following the occurrence of the violation;
   ii) Any record showing a violation of subsection (a)(1) of this Section shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation; and
   iii) At least 30 calendar days before changing the method of
compliance with subsection (a) of this Section from subsection (a)(1) to (a)(2) of this Section, the owner or operator shall comply with all requirements of subsection (b)(3)(A) of this Section. Upon changing the method of compliance with subsection (a) of this Section from subsection (a)(1) to (a)(2) of this Section, the owner or operator shall comply with all requirements of subsection (b)(3) of this Section.

3) Any owner or operator of a printing line subject to the limitations of subsection (a) of this Section and complying by means of subsection (a)(2) of this Section shall:

A) By a date consistent with Section 219.106 of this Part, or upon initial start-up of a new printing line, or upon changing the method of compliance for an existing printing line from subsection (a)(1) to (a)(2) of this Section, perform all tests and submit to the Agency and the USEPA the results of all tests and calculations necessary to demonstrate that the subject printing line will be in compliance with subsection (a)(2) of this Section on and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date;

B) On and after a date consistent with Section 219.106 of this Part, or on and after the initial start-up date, collect and record the following information each day for each printing line and maintain the information at the source for a period of three years:

i) The VOM content of the fountain solution used each day on each printing line;

ii) A log of operating time for the control device and the associated printing line; and

iii) A maintenance log for the control device detailing all routine and non-routine maintenance performed including dates and duration of any outages;

C) On and after a date consistent with Section 219.106 of this Part,
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notify the Agency in the following instances:

i) Any violation of subsection (a)(2) shall be reported to the Agency, in writing, within 30 days following the occurrence of the violation;

ii) Any record showing a violation of subsection (a)(2) of this Section shall be reported by sending a copy of such record to the Agency within 30 days following the occurrence of the violation; and

iii) At least 30 calendar days before changing the method of compliance with subsection (a) of this Section from subsection (a)(2) to (a)(1) of this Section, the owner or operator shall comply with all requirements of subsection (b)(2)(A) of this Section. Upon changing the method of compliance with subsection (a) of this Section from subsection (a)(2) to (a)(1) of this Section, the owner or operator shall comply with all requirements of subsection (b)(2) of this Section.

c) Compliance Schedule.  Every owner or operator of a heatset web offset lithographic printing line shall comply with the applicable requirements of subsections (a) and (b) of this Section in accordance with the applicable compliance schedule specified in subsections (c)(1), (c)(2), or (c)(3) of this Section:

1) No owner or operator of a heatset web offset lithographic printing line which is exempt from the limitations of subsection (a) of this Section because of the criteria in Section 219.405(a) of this Subpart shall operate said printing line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, Sections 219.405(a) and 219.406(b)(1) of this Subpart.

2) No owner or operator of a heatset web offset lithographic printing line complying by means of subsection (a)(1) of this Section shall operate said printing line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, subsections (a)(1), (a)(3), (a)(4) and (b)(2) of this Section.
3) No owner or operator of a heatset web offset lithographic printing line complying by means of subsection (a)(2) of this Section shall operate said printing line on or after a date consistent with Section 219.106 of this Part, unless the owner or operator has complied with, and continues to comply with, subsections (a)(2), (a)(3), (a)(4) and (b)(3) of this Section.

(Source: Repealed at 34 Ill. Reg. _______, effective ____________)

Section 219.407 Emission Limitations and Control Requirements for Lithographic Printing Lines On and After March 15, 1996

a) No on and after March 15, 1996, no owner or operator of lithographic printing lines subject to the requirements of this Subpart shall:

1) Cause or allow the operation of any heatset web offset lithographic printing line unless:

A) The total VOM content in the as-applied fountain solution meets one of the following conditions:

i) 1.6 percent or less, by weight;

ii) 3 percent or less, by weight, and the temperature of the fountain solution is maintained below 15.6° C (60° F), measured at the reservoir or the fountain tray; or

iii) 5 percent or less, by weight, and the as-applied fountain solution contains no alcohol;

B) The air pressure in the dryer is maintained lower than the air pressure of the press room, such that air flow through all openings in the dryer, other than the exhaust, is into the dryer at all times when the printing line is operating;

C) An afterburner is installed and operated so that VOM emissions (excluding methane and ethane) from the press dryer exhaust(s) are reduced as follows:
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i) Prior to May 1, 2010, by 90 percent, by weight, or to a maximum afterburner exhaust outlet concentration of 20 ppmv (as carbon); and

ii) On and after May 1, 2010, by at least 90 percent, by weight, for afterburners first constructed at the source prior to January 1, 2010; by at least 95 percent, by weight, for afterburners first constructed at the source on or after January 1, 2010; or to a maximum afterburner exhaust outlet concentration of 20 ppmv (as carbon);

D) The afterburner complies with all monitoring provisions specified in Section 219.410(c) of this Subpart is equipped with the applicable monitoring equipment specified in Section 219.105(d)(2) of this Part and the monitoring equipment is installed, calibrated, operated, and maintained according to manufacturer’s specifications at all times when the afterburner is in use; and

E) The afterburner is operated at all times when the printing line is in operation, except the afterburner may be shut down between November 1 and April 1 as provided in Section 219.107 of this Part;

2) Cause or allow the operation of any non-heatset web offset lithographic printing line unless the VOM content of the as-applied fountain solution is 5 percent or less, by weight volume, and the as-applied fountain solution contains no alcohol;

3) Cause or allow the operation of any sheet-fed offset lithographic printing line unless:

   A) The VOM content of the as-applied fountain solution is 5 percent or less, by weight volume; or

   B) The VOM content of the as-applied fountain solution is 8.5 percent or less, by weight volume, and the temperature of the fountain solution is maintained below 15.6°C (60°F), measured at the
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reservoir or the fountain tray;

4) Cause or allow the use of a cleaning solution on any lithographic printing line unless:

   A) The VOM content of the as-used cleaning solution is less than or equal to:

      i) 30 percent, by weight; or

      ii) On and after May 1, 2010, for owners or operators of sources that meet the applicability criteria in Section 219.405(c)(3) and do not certify pursuant to Section 219.411(g)(1)(B) that the source will not make use of any of the exclusions in Section 219.405(c)(3), 70 percent, by weight; or

   B) The VOM composite partial vapor pressure of the as-used cleaning solution is less than 10 mmHg at 20° C (68° F);

5) Cause or allow VOM containing cleaning materials, including used cleaning towels, associated with any lithographic printing line to be kept, stored or disposed of in any manner other than in closed containers, except when specifically in use.

   b) An owner or operator of a heatset web offset lithographic printing line subject to the requirements of Section 219.407(a)(1)(C) of this Subpart may use a control device other than an afterburner, if:

      1) The control device reduces VOM emissions from the press dryer exhausts exhaust(s) as follows:

         A) Prior to May 1, 2010, by at least 90 percent, by weight, or to a maximum control device exhaust outlet concentration of 20 ppmv (as carbon); and

         B) On and after May 1, 2010:
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i) By at least 90 percent, by weight, for control devices first constructed at the source prior to January 1, 2010;

ii) By at least 95 percent, by weight, for control devices first constructed at the source on or after January 1, 2010; or

iii) To a maximum control device exhaust outlet concentration of 20 ppmv (as carbon);

2) The owner or operator submits a plan to the Agency detailing appropriate monitoring devices, test methods, recordkeeping requirements, and operating parameters for the control device; and

3) The use of the control device with testing, monitoring, and recordkeeping in accordance with this plan is approved by the Agency and USEPA as federally enforceable permit conditions.

(Source: Amended at 34 Ill. Reg. _______, effective ____________)

Section 219.408 Compliance Schedule for Lithographic Printing On and After March 15, 1996 (Repealed)

a) Every owner or operator of a lithographic printing line subject to one or more of the control requirements of Section 219.407 of this Subpart shall comply with the applicable requirements of Sections 219.407 through 219.411 of this Subpart on and after March 15, 1996, or upon initial start-up, whichever is later.

b) No owner or operator of a lithographic printing line which is exempt from the limitations of Section 219.407 of this Subpart because of the criteria in Section 219.405(d) of this Subpart, shall operate said printing line on or after March 15, 1996, unless the owner or operator has complied with, and continues to comply with, Sections 219.405(d) and 219.411(a) of this Subpart.

(Source: Repealed at 34 Ill. Reg. _______, effective ____________)

Section 219.409 Testing for Lithographic Printing On and After March 15, 1996

a) Testing to demonstrate compliance with the requirements of Section 219.407 of this Subpart shall be conducted by the owner or operator within 90 days after a
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request by the Agency, or as otherwise specified in this Subpart. Such testing shall be conducted at the expense of the owner or operator and the owner or operator shall notify the Agency in writing 30 days in advance of conducting such testing to allow the Agency to be present during such testing.

b) The methods and procedures of Section 219.105(d) and (f) shall be used for testing to demonstrate compliance with the requirements of Section 219.407(a)(1)(C) or (b)(1) of this Subpart, as follows:

1) To select the sampling sites, Method 1 or 1A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference at Section 219.112 of this Part. The sampling sites for determining efficiency in reducing VOM from the dryer exhaust shall be located between the dryer exhaust and the control device inlet, and between the outlet of the control device and the exhaust to the atmosphere;

2) To determine the volumetric flow rate of the exhaust stream, Method 2, 2A, 2C, or 2D, as appropriate, 40 CFR 60, Appendix A, incorporated by reference at Section 219.112 of this Part;

3) To determine the VOM concentration of the exhaust stream entering and exiting the control device, Method 25 or 25A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference at Section 219.112 of this Part. For thermal and catalytic afterburners, Method 25 must be used except under the following circumstances, in which case Method 25A must be used:

   A) The allowable outlet concentration of VOM from the control device is less than 50 ppmv, as carbon;

   B) The VOM concentration at the inlet of the control device and the required level of control result in exhaust concentrations of VOM of 50 ppmv, or less, as carbon; and

   C) Due to the high efficiency of the control device, the anticipated VOM concentration at the control device exhaust is 50 ppmv or less, as carbon, regardless of inlet concentration. If the source elects to use Method 25A under this option, the exhaust VOM concentration must be 50 ppmv or less, as carbon, and the required
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destruction efficiency must be met for the source to have
demonstrated compliance. If the Method 25A test results show
that the required destruction efficiency apparently has been met,
but the exhaust concentration is above 50 ppmv, as carbon, a retest
is required. The retest shall be conducted using either Method 25
or Method 25A. If the retest is conducted using Method 25A and
the test results again show that the required destruction efficiency
apparently has been met, but the exhaust concentration is above 50
ppmv, as carbon, the source must retest using Method 25;

4) Notwithstanding the criteria or requirements in Method 25 that which
specifies a minimum probe temperature of 129°C (265°F), the probe must be
heated to at least the gas stream temperature of the dryer exhaust, typically
close to 176.7°C (350°F);

5) During testing, the printing lines line(s) shall be operated at representative
operating conditions and flow rates; and

6) During testing, an air flow direction indicating device, such as a smoke
stick, shall be used to demonstrate 100 percent emissions capture
efficiency for the dryer in accordance with Section 219.407(a)(1)(B) of
this Subpart.

c) Testing to demonstrate compliance with the VOM content limitations in Section
219.407(a)(1)(A), (a)(2), (a)(3) and (a)(4)(A) of this Subpart, and to determine the
VOM content of fountain solutions, fountain solution additives, cleaning solvents,
cleaning solutions, and inks (pursuant to the requirements of Section
219.411(a)(1)(B), (b)(1)(B), or (b)(2)(B) of this Subpart, as applicable), shall be
conducted upon request of the Agency or as otherwise specified in this Subpart, as
follows:

1) The applicable test methods and procedures specified in Section
219.105(a) of this Part shall be used; provided, however, Method 24,
incorporated by reference at Section 219.112 of this Part, shall be used to
demonstrate compliance; or

2) The manufacturer's specifications for VOM content for fountain solution
additives, cleaning solvents, and inks may be used if such manufacturer's
specifications are based on results of tests of the VOM content conducted
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in accordance with methods specified in Section 219.105(a) of this Part; provided, however, Method 24 shall be used to determine compliance.

d) Testing to demonstrate compliance with the requirements of Section 219.407(b) of this Subpart shall be conducted as set forth in the owner or operator's plan approved by the Agency and USEPA as federally enforceable permit conditions pursuant to Section 219.407(b) of this Subpart.

e) Testing to determine the VOM composite partial vapor pressure of cleaning solvents, cleaning solvent concentrates, and as-used cleaning solutions shall be conducted in accordance with the applicable methods and procedures specified in Section 219.110 of this Part.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.410 Monitoring Requirements for Lithographic Printing

a) Fountain Solution Temperature.

1) The owner or operator of any lithographic printing line(s) relying on the temperature of the fountain solution to demonstrate compliance shall install, maintain, and continuously operate a temperature monitor of the fountain solution in the reservoir or fountain tray, as applicable.

2) The temperature monitor must be capable of reading with an accuracy of 1° C or 2° F, and must be attached to an automatic, continuous recording device such as a strip chart, recorder, or computer, with at least the same accuracy, that is installed, calibrated and maintained in accordance with the manufacturer's specifications. If the automatic, continuous recording device malfunctions, the owner or operator shall record the temperature of the fountain solution at least once every two operating hours. The automatic, continuous recording device shall be repaired or replaced as soon as practicable.

b) Fountain Solution VOM Content. The owner or operator of any lithographic printing line(s) subject to Section 219.407(a)(1)(A), (a)(2) or (a)(3) of this Subpart shall:

1) For a fountain solution to which VOM is not added automatically:
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A) Maintain records of the VOM content of the fountain solution in accordance with Section 219.411(ge)(2)(C); or

B) Take a sample of the as-applied fountain solution from the fountain tray or reservoir, as applicable, each time a fresh batch of fountain solution is prepared or each time VOM is added to an existing batch of fountain solution in the fountain tray or reservoir, and shall determine compliance with the VOM content limitation of the as-applied fountain solution by using one of the following options:

i) With a refractometer or hydrometer with a visual, analog, or digital readout and with an accuracy of 0.5 percent. The refractometer or hydrometer must be calibrated with a standard solution for the type of VOM used in the fountain solution, in accordance with manufacturer's specifications, against measurements performed to determine compliance. The refractometer or hydrometer must be corrected for temperature at least once per 8-hour shift or once per batch of fountain solution prepared or modified, whichever is longer; or

ii) With a conductivity meter if it is demonstrated that a refractometer and hydrometer cannot distinguish between compliant and noncompliant fountain solution for the type and amount of VOM in the fountain solution. A source may use a conductivity meter if it demonstrates that both hydrometers and refractometers fail to provide significantly different measurements for standard solutions containing 95 percent, 100 percent and 105 percent of the applicable VOM content limit. The conductivity meter reading for the fountain solution must be referenced to the conductivity of the incoming water. A standard solution shall be used to calibrate the conductivity meter for the type of VOM used in the fountain solution, in accordance with manufacturer's specifications;

2) For fountain solutions to which VOM is added at the source with automatic feed equipment, determine the VOM content of the as-applied
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fountain solution based on the setting of the automatic feed equipment which makes additions of VOM up to a pre-set level. Records must be retained of the VOM content of the fountain solution in accordance with Section 219.411(ge)(2)(D) of this Subpart. The equipment used to make automatic additions must be installed, calibrated, operated and maintained in accordance with manufacturer's specifications.

c) Afterburners For Heatset Web Offset Lithographic Printing Lines Line(s). If an afterburner is used to demonstrate compliance, the owner or operator of a heatset web offset lithographic printing line subject to Section 219.407(a)(1)(C) of this Subpart shall:

1) Install, calibrate, maintain, and operate temperature monitoring devices with an accuracy of $3^\circ$ C or $5^\circ$ F on the afterburner in accordance with Section 219.105(d)(2) of this Part and in accordance with the manufacturer's specifications. Monitoring shall be performed at all times when the afterburner is operating; and

2) Install, calibrate, operate and maintain, in accordance with manufacturer's specifications, a continuous recorder on the temperature monitoring devices, such as a strip chart, recorder or computer, with at least the same accuracy as the temperature monitor.

d) Other Control Devices for Heatset Web Offset Lithographic Printing Lines Line(s). If a control device other than an afterburner is used to demonstrate compliance, the owner or operator of a heatset web offset lithographic printing line subject to this Subpart shall install, maintain, calibrate and operate such monitoring equipment as set forth in the owner or operator's plan approved by the Agency and USEPA pursuant to Section 219.407(b) of this Subpart.

e) Cleaning Solution

1) The owner or operator of any lithographic printing line relying on the VOM content of the cleaning solution to comply with Section 219.407(a)(4)(A) of this Subpart must:

A) For cleaning solutions that are prepared at the source with equipment that automatically mixes cleaning solvent and water (or other non-VOM):
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i) Install, operate, maintain, and calibrate the automatic feed equipment in accordance with manufacturer’s specifications to regulate the volume of each of the cleaning solvent and water (or other non-VOM), as mixed; and

ii) Pre-set the automatic feed equipment so that the consumption rates of the cleaning solvent and water (or other non-VOM), as applied, comply with Section 219.407(a)(4)(A) of this Subpart;

B) For cleaning solutions that are not prepared at the source with automatic feed equipment, keep records of the usage of cleaning solvent and water (or other non-VOM) as set forth in Section 219.411(f)(2) of this Subpart.

2) The owner or operator of any lithographic printing line relying on the vapor pressure of the cleaning solution to comply with Section 219.407(a)(4)(B) of this Subpart must keep records for such cleaning solutions used on any such line(s) as set forth in Section 219.411(f)(2)(C) of this Subpart.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 219.411 Recordkeeping and Reporting for Lithographic Printing

a) Exempt units prior to May 1, 2010. An owner or operator of lithographic printing line(s) exempt from the limitations of Section 219.407 of this Subpart prior to May 1, 2010, because of the criteria in Section 219.405(bd) of this Subpart, shall comply with the following:

1) Upon March 15, 1996, upon initial start-up of a new lithographic printing line, and upon modification of a lithographic printing line, submit a certification to the Agency that includes:

   A) A declaration that the source is exempt from the control requirements in Section 219.407 of this Part because of the criteria in Section 219.405(bd) of this Subpart;
B) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source never exceed 45.5 kg/day (100 lbs/day) before the use of capture systems and control devices, as follows:

i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) and divide this amount by the number of days during that calendar month that lithographic printing lines at the source were in operation;

ii) To determine the VOM content of the inks, fountain solution additives and cleaning solvents, the tests methods and procedures set forth in Section 219.409(c) of this Subpart shall be used;

iii) To determine VOM emissions from inks used on lithographic printing line(s) at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing line(s); and

iv) To determine VOM emissions from fountain solutions and cleaning solvents used on lithographic printing line(s) at the source, no retention factor is used;

C) Either a declaration that the source, through federally enforceable
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permit conditions, has limited its maximum theoretical emissions of VOM from all heatset web offset lithographic printing lines (including solvents used for cleanup operations associated with heatset web offset printing lines) at the source to no more than 90.7 Mg (100 tons) per calendar year before the application of capture systems and control devices or calculations which demonstrate that the source's total maximum theoretical emissions of VOM do not exceed 90.7 Mg/yr (100 TPY). Total maximum theoretical emissions of VOM for a heatset web offset lithographic printing source is the sum of maximum theoretical emissions of VOM from each heatset web offset lithographic printing line at the source. The following equation shall be used to calculate total maximum theoretical emissions of VOM per calendar year in the absence of air pollution control equipment for each heatset web offset lithographic printing line at the source: To determine the source's total maximum theoretical emissions for the purposes of this subsection, the owner or operator shall use the calculations set forth in Section 219.406(b)(1)(A)(ii) of this Subpart; and

\[ E_p = \frac{C \times A \times B \times D \times 1095}{F \times G \times H} \]

where:

\( E_p \) = Total maximum theoretical emissions of VOM from one heatset web offset printing line in units of kg/yr (lb/yr);

\( A \) = Weight of VOM per volume of solids of ink with the highest VOM content as applied each year on the printing line in units of kg/l (lb/gal) of solids;

\( B \) = Total volume of solids for all inks that can potentially be applied each year on the printing line in units of gal/yr. The method by which the owner or operator accurately calculated the volume of each ink as applied and the amount that can potentially be applied each year on the printing line shall be described in the certification to the Agency;

\( C \) = Weight of VOM per volume of fountain solution with the
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highest VOM content as applied each year on the printing line in units of kg/l (lb/gal);

\[ D = \text{The total volume of fountain solution that can potentially be used each year on the printing line in units of 1/yr (gal/yr). The method by which the owner or operator accurately calculated the volume of each fountain solution used and the amount that can potentially be used each year on the printing line shall be described in the certification to the Agency;} \]

\[ F = \text{Weight of VOM per volume of material for the cleanup material or solvent with the highest VOM content as used each year on the printing line in units of kg/l (lb/gal) of such material;} \]

\[ G = \text{The greatest volume of cleanup material or solvent used in any 8-hour period;} \]

\[ H = \text{The highest fraction of cleanup material or solvent that is not recycled or recovered for offsite disposal during any 8-hour period;} \]

\[ R = \text{The multiplier representing the amount of VOM not retained in the substrate being used. For paper, } R = 0.8, \text{ for metal, plastic, or other impervious substrates, } R = 1.0; \]

D) A description and the results of all tests used to determine the VOM content of inks, fountain solution additives, and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 219.409(c)(1) of this Subpart;

2) Notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs. Such notification shall include a copy of all records of such event.
b) Exempt units on and after May 1, 2010.

1) Lithographic printing lines exempt pursuant to Section 219.405(c)(2). By May 1, 2010, or upon initial start-up of a new lithographic printing line, whichever is later, and upon modification of a lithographic printing line, an owner or operator of lithographic printing lines exempt from the limitations in Section 219.407 of this Subpart because of the criteria in Section 219.405(c)(2) of this Subpart shall submit a certification to the Agency that includes the information specified in either subsections (b)(1)(A), (b)(1)(B) and (b)(1)(D) of this Section, or subsections (b)(1)(A) and (b)(1)(C) of this Section, as applicable. An owner or operator complying with subsection (b)(1)(B) shall also comply with the requirements in subsection (b)(1)(E) of this Section. An owner or operator complying with subsection (b)(1)(C) shall also comply with the requirements in subsection (b)(1)(F) of this Section:

A) A declaration that the source is exempt from the requirements in Section 219.407 of this Part because of the criteria in Section 219.405(c)(2) of this Subpart;

B) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source do not equal or exceed 6.8 kg/day (15 lbs/day), before the use of capture systems and control devices, as follows:

i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) and divide this amount by the number of days during that calendar month that lithographic printing lines at the source were in operation;

ii) To determine the VOM content of the inks, fountain solution additives and cleaning solvents, the test methods...
and procedures set forth in Section 219.409(c) of this Subpart shall be used;

iii) To determine VOM emissions from inks used on lithographic printing lines at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines; and

iv) To determine VOM emissions from cleaning solutions used on lithographic printing lines at the source, an emission adjustment factor of 0.50 shall be used in calculating emissions from used shop towels if the VOM composite vapor pressure of each associated cleaning solution is less than 10 mmHg measured at 20°C (68°F) and the shop towels are kept in closed containers. For cleaning solutions with VOM composite vapor pressures of equal to or greater than 10 mmHg measured at 20°C (68°F) and for shop towels that are not kept in closed containers, no emission adjustment factor is used;

C) As an alternative to the calculations in subsection (b)(1)(B), a statement that the source uses less than the amount of material specified in subsection (b)(1)(C)(i) or (ii), as applicable, during each calendar month. A source may determine that it emits below 6.8 kg/day (15 lbs/day) of VOM based upon compliance with such material use limitations. If the source exceeds this amount of material use in a given calendar month, the owner or operator must, within 15 days after the end of that month, complete the emissions calculations of subsection (b)(1)(B) to determine daily emissions for applicability purposes. If the source ever exceeds this amount of material use for six consecutive calendar months, it is
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no longer eligible to use this subsection (b)(1)(C) as an alternative to the calculations in subsection (b)(1)(B). If a source has both heatset web offset and either nonheatset web offset or sheetfed lithographic printing operations, or has all three types of printing operations, the owner or operator may not make use of this alternative and must use the calculations in subsection (b)(1)(B).

i) The sum of all sheetfed and nonheatset web offset lithographic printing operations at the source: 242.3 liters (64 gallons) of cleaning solvent and fountain solution additives, combined; or

ii) The sum of all heatset web offset lithographic printing operations at the source: 204.1 kg (450 lbs) of ink, cleaning solvent, and fountain solution additives, combined;

D) A description and the results of all tests used to determine the VOM content of inks, fountain solution additives, and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 219.409(c)(1) of this Subpart;

E) For sources complying with subsection (b)(1)(B) of this Section, notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever equal or exceed 6.8 kg/day (15 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs. If such emissions of VOM at the source equal or exceed 6.8 kg/day (15 lbs/day) but do not exceed 45.5 kg/day (100 lbs/day), the source shall comply with the requirements in subsection (b)(2) of this Section;

F) For sources complying with subsection (b)(1)(C) of this Section, comply with the following:

i) Maintain material use records showing that the source uses less than the amount of material specified in subsections
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(b)(1)(C)(i) and (b)(1)(C)(ii) during each calendar month, or, if the source exceeds the material use limitations, records showing that the source exceeded the limitations but did not emit 6.8 kg/day (15 lbs/day) or more of VOM;

ii) Notify the Agency in writing if the source exceeds the material use limitations for six consecutive calendar months, or if the source changes its method of compliance from subsection (b)(1)(C) to subsection (b)(1)(B) of this Section, within 30 days after the event occurs;

2) Heatset web offset lithographic printing lines exempt pursuant to Section 219.405(c)(1) but not exempt pursuant to Section 219.405(c)(2). By May 1, 2010, or upon initial start-up of a new heatset web offset lithographic printing line, whichever is later, and upon modification of a heatset web offset lithographic printing line, an owner or operator of heatset web offset lithographic printing lines that are exempt from the limitations in Section 219.407 of this Subpart pursuant to the criteria in Section 219.405(c)(1) of this Subpart, but that are not exempt pursuant to the criteria in Section 219.405(c)(2) of this Subpart, shall submit a certification to the Agency that includes the information specified in subsections (b)(2)(A) through (b)(2)(C) of this Section. Such owner or operator shall also comply with the requirements in subsection (b)(2)(D) of this Section:

A) A declaration that the source is exempt from the control requirements in Section 219.407 of this Part because of the criteria in Section 219.405(c)(1) of this Subpart, but is not exempt pursuant to the criteria in Section 219.405(c)(2) of this Subpart;

B) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source never exceed 45.5 kg/day (100 lbs/day) before the use of capture systems and control devices, as follows (the following methodology shall also be used to calculate whether a source exceeds 45.5 kg/day (100 lbs/day) for purposes of determining eligibility for the exclusions set forth in Section 219.405(c)(3), in accordance with Section 219.411(g)(2)(A)(i)): 
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i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM from all lithographic printing lines at the source (including solvents used for cleanup operations associated with the lithographic printing lines) and divide this amount by the number of days during that calendar month that lithographic printing lines at the source were in operation;

ii) To determine the VOM content of the inks, fountain solution additives and cleaning solvents, the test methods and procedures set forth in Section 219.409(c) of this Subpart shall be used;

iii) To determine VOM emissions from inks used on lithographic printing lines at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines;

iv) To determine VOM emissions from cleaning solvents used on lithographic printing lines at the source, an emission adjustment factor of 0.50 shall be used in calculating emissions from cleaning solution in shop towels if the VOM composite vapor pressure of such cleaning solution is less than 10 mmHg measured at 20° C (68° F) and the shop towels are kept in closed containers. For cleaning solutions with VOM composite vapor pressures of equal to or greater than 10 mmHg measured at 20° C (68° F) and for shop towels that are not kept in closed containers, no emission adjustment factor is used;
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C) A description and the results of all tests used to determine the VOM content of inks, fountain solution additives, and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 219.409(c)(1) of this Subpart;

D) Notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs.

c2) Unless complying with subsections (b)(1)(C) and (b)(1)(F) of this Section, an owner or operator of lithographic printing lines subject to the requirements of subsection (a) or (b) of this Section shall, On and after March 15, 1996, collect and record either the information specified in subsection (c)(1) or (c)(2) or (a)(2)(A) or (a)(2)(B) of this Section for all lithographic printing lines at the source:

1A) Standard recordkeeping, including the following:

Ai) The name and identification of each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line, recorded each month;

Bi) A daily record which shows whether a lithographic printing line at the source was in operation on that day;

Ci) The VOM content and the volume of each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line, recorded each month;

Dvi) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each fountain solution additive, cleaning solvent, and lithographic ink (with the applicable ink VOM emission adjustment) used at the source, calculated each month; and

Evi) The VOM emissions in lbs/day for the month, calculated in
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accordance with Section 218.411(a)(1)(B), 219.411(b)(1)(B), or 219.411(b)(2)(B) of this Subpart, as applicable;

2B) Purchase and inventory recordkeeping, including the following:

   Ai) The name, identification, and VOM content of each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line, recorded each month;

   Biii) Inventory records from the beginning and end of each month indicating the total volume of each fountain solution additive, lithographic ink, and cleaning solvent to be used on any lithographic printing line at the source;

   Ciii) Monthly purchase records for each fountain solution additive, lithographic ink, and cleaning solvent used on any lithographic printing line at the source;

   Div) A daily record which shows whether a lithographic printing line at the source was in operation on that day;

   Ev) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each fountain solution additive, cleaning solvent, and lithographic ink (with the applicable ink VOM emission adjustment) used at the source, calculated each month based on the monthly inventory and purchase records required to be maintained pursuant to subsections (c)(2)(A), (c)(2)(B), and (c)(2)(C)(a)(2)(B)(i), (a)(2)(B)(ii) and (a)(2)(B)(iii) of this Section; and

   Fvi) The VOM emissions in lbs/day for the month, calculated in accordance with Section 219.411(a)(1)(B), 219.411(b)(1)(B), or 219.411(b)(2)(B) of this Subpart, as applicable;

3) On and after March 15, 1996, notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems
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and control devices, within 30 days after the event occurs. Such notification shall include a copy of all records of such event.

db) An owner or operator of a heatset web offset lithographic printing line(s) subject to the control requirements of Section 219.407(a)(1)(C) or (b)(1) of this Subpart shall comply with the following:

1) By May 1, 2010 [March 15, 1996], upon initial start-up of a new printing line, and upon initial start-up of a new control device for a heatset web offset printing line, submit a certification to the Agency that includes the following:

A) An identification of each heatset web offset lithographic printing line at the source;

B) A declaration that each heatset web offset lithographic printing line is in compliance with the requirements of Section 219.407 (a)(1)(B), (a)(1)(C), (a)(1)(D) and (a)(1)(E) or (b) of this Subpart, as appropriate;

C) The type of afterburner or other approved control device used to comply with the requirements of Section 219.407(a)(1)(C) or (b)(1) of this Subpart and the date that such device was first constructed at the source;

D) The control requirements in Section 219.407(a)(1)(C) or (b)(1) of this Subpart with which the lithographic printing line is complying;

E) The results of all tests and calculations necessary to demonstrate compliance with the control requirements of Section 219.407(a)(1)(C) or (b)(1) of this Subpart, as applicable; and

F) A declaration that the monitoring equipment required under Section 219.407(a)(1)(D) or (b) of this Subpart, as applicable, has been properly installed and calibrated according to manufacturer's specifications;

2) If testing of the afterburner or other approved control device is conducted pursuant to Section 219.409(b) of this Subpart, the owner or operator
shall, within 90 days after conducting such testing, submit a copy of all test results to the Agency and shall submit a certification to the Agency that includes the following:

A) A declaration that all tests and calculations necessary to demonstrate whether the lithographic printing line(s) is in compliance with Section 219.407(a)(1)(C) or (b)(1) of this Subpart, as applicable, have been properly performed;

B) A statement whether the lithographic printing line(s) is or is not in compliance with Section 219.407(a)(1)(C) or (b)(1) of this Subpart, as applicable; and

C) The operating parameters of the afterburner or other approved control device during testing, as monitored in accordance with Section 219.410(c) or (d) of this Subpart, as applicable;

3) Except as provided in subsection (d)(3)(D)(ii) of this Section, On and after March 15, 1996, collect and record daily the following information for each heatset web offset lithographic printing line subject to the requirements of Section 219.407(a)(1)(C) or (b)(1) of this Subpart:

A) Afterburner or other approved control device monitoring data in accordance with Section 219.410(c) or (d) of this Subpart, as applicable;

B) A log of operating time for the afterburner or other approved control device, monitoring equipment, and the associated printing line;

C) A maintenance log for the afterburner or other approved control device and monitoring equipment detailing all routine and non-routine maintenance performed, including dates and duration of any outages; and

D) A log detailing checks on the air flow direction or air pressure of the dryer and press room to ensure compliance with the requirements of Section 219.407(a)(1)(B) of this Subpart as follows:
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i) Prior to May 1, 2010, at least once per 24-hour period while the line is operating; and

ii) On and after May 1, 2010, at least once per calendar month while the line is operating;

4) Notify the Agency in writing of any violation of Section 219.407(a)(1)(C) or (b)(1) of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation;

5) If changing its method of compliance between subsections (a)(1)(C) and (b) of Section 219.407 of this Subpart, certify compliance for the new method of compliance in accordance with subsection (b)(1) of this Section at least 30 days before making such change, and perform all tests and calculations necessary to demonstrate that such printing lines will be in compliance with the requirements of Section 219.407(a)(1)(B), (a)(1)(C), (a)(1)(D) and (a)(1)(E) of this Subpart, or Section 219.407(b) of this Subpart, as applicable.

ee) An owner or operator of a lithographic printing line subject to Section 219.407(a)(1)(A), (a)(2), or (a)(3) of this Subpart, shall:

1) By May 1, 2010, March 15, 1996, and upon initial start-up of a new lithographic printing line, certify to the Agency that fountain solutions used on each lithographic printing line will be in compliance with the applicable VOM content limitation. Such certification shall include:

A) Identification of each lithographic printing line at the source, by type, e.g., heatset web offset, non-heatset web offset, or sheet-fed offset;

B) Identification of each centralized fountain solution reservoir and each lithographic printing line that it serves;

C) A statement that the fountain solution will comply with the VOM content limitations in Section 219.407(a)(1)(A), (a)(2), or (a)(3), as applicable; The VOM content limitation with which each fountain
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solution will comply;

D) Initial documentation that each type of fountain solution will comply with the applicable VOM content limitations, including copies of manufacturer's specifications, test results, if any, formulation data and calculations;

E) Identification of the method that will be used to demonstrate continuing compliance with the applicable limitation, e.g., a refractometer, hydrometer, conductivity meter, or recordkeeping procedures with detailed description of the compliance methodology; and

F) A sample of the records that will be kept pursuant to Section 219.411(2) of this Subpart.

2) Collect and record the following information for each fountain solution:

A) The name and identification of each batch of fountain solution prepared for use on one or more lithographic printing lines, the lithographic printing lines or centralized reservoir using such batch of fountain solution, and the applicable VOM content limitation for the batch;

B) If an owner or operator uses a hydrometer, refractometer, or conductivity meter, pursuant to Section 219.410(b)(1)(B), to demonstrate compliance with the applicable VOM content limit in Section 219.407(a)(1)(A), (a)(2), or (a)(3) of this Subpart:

i) The date and time of preparation, and each subsequent modification, of the batch;

ii) The results of each measurement taken in accordance with Section 219.410(b) of this Subpart;

iii) Documentation of the periodic calibration of the meter in accordance with the manufacturer's specifications, including date and time of calibration, personnel
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conducting, identity of standard solution, and resultant reading; and

iv) Documentation of the periodic temperature adjustment of the meter, including date and time of adjustment, personnel conducting and results;

C) If the VOM content of the fountain solution is determined pursuant to Section 219.410(b)(1)(A) of this Subpart, for each batch of as-applied fountain solution:

i) Date and time of preparation and each subsequent modification of the batch;

ii) Volume or weight, as applicable, and VOM content of each component used in, or subsequently added to, the fountain solution batch;

iii) Calculated VOM content of the as-applied fountain solution; and

iv) Any other information necessary to demonstrate compliance with the applicable VOM content limits in Section 219.407(a)(1)(A), (a)(2) and (a)(3) of this Subpart, as specified in the source's operating permit;

D) If the VOM content of the fountain solution is determined pursuant to Section 219.410(b)(2) of this Subpart, for each setting:

i) VOM content limit corresponding to each setting;

ii) Date and time of initial setting and each subsequent setting;

iii) Documentation of the periodic calibration of the automatic feed equipment in accordance with the manufacturer's specifications; and

iv) Any other information necessary to demonstrate compliance with the applicable VOM content limits in
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Sections 219.407(a)(1)(A), (a)(2) and (a)(3) of this Subpart, as specified in the source’s operating permit.

E) If the owner or operator relies on the temperature of the fountain solution to comply with the requirements in Section 219.407(a)(1)(A)(ii) or (a)(3)(B) of this Subpart:

i) The temperature of the fountain solution at each printing line, as monitored in accordance with Section 219.410(a); and

ii) A maintenance log for the temperature monitoring devices and automatic, continuous temperature recorders detailing all routine and non-routine maintenance performed, including dates and duration of any outages;

3) Notify the Agency in writing of any violation of Section 219.407 of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation.

4) If changing its method of demonstrating compliance with the applicable VOM content limitations in Section 219.407 of this Subpart, or changing the method of demonstrating compliance with the VOM content limitations for fountain solutions pursuant to Section 219.409 of this Subpart, certify compliance for such new method(s) in accordance with subsection (c)(1) of this Section within 30 days after making such change, and perform all tests and calculations necessary to demonstrate that such printing line(s) will be in compliance with the applicable requirements of Section 219.407 of this Subpart.

fd) For lithographic printing line cleaning operations, an owner or operator of a lithographic printing line subject to the requirements of Section 219.407 of this Subpart shall:

1) By May 1, 2010, March 15, 1996, and upon initial start-up of a new lithographic printing line, certify to the Agency that all cleaning solutions, other than those excluded pursuant to Section 219.405(c)(3)(C), and the handling of all cleaning materials, will be in compliance with the requirements of Section 219.407(a)(4)(A) or (a)(4)(B) and (a)(5) of this
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Subpart, and such certification shall also include:

A) Identification of each VOM-containing cleaning solution used on each lithographic printing line;

AB) A statement that the cleaning solution will comply with the limitations in Section 219.407(a)(4); The limitation with which each VOM-containing cleaning solution will comply, i.e., the VOM content or vapor pressure;

C) Initial documentation that each VOM-containing cleaning solution will comply with the applicable limitation, including copies of manufacturer's specifications, test results, if any, formulation data and calculations;

BD) Identification of the method that will be used to demonstrate continuing compliance with the applicable limitations;

CE) A sample of the records that will be kept pursuant to Section 219.411(fd)(2) of this Subpart; and

DF) A description of the practices that ensure that VOM-containing cleaning materials are kept in closed containers;

2) Collect and record the following information for each cleaning solution used on each lithographic printing line:

A) For each cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section 219.407(a)(4)(A) of this Subpart and that is prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 219.409(c) of this Subpart;
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iii) Each change to the setting of the automatic equipment, with date, time, description of changes in the cleaning solution constituents (e.g., cleaning solvents), and a description of changes to the proportion of cleaning solvent and water (or other non-VOM);

iv) The proportion of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution;

v) The VOM content of the as-used cleaning solution, with supporting calculations; and

vi) A calibration log for the automatic equipment, detailing periodic checks;

B) For each batch of cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section 219.407(a)(4)(A) of this Subpart, and which is not prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) Date and time of preparation, and each subsequent modification, of the batch;

iii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 219.409(c) of this Subpart;

iv) The total amount of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution; and

v) The VOM content of the as-used cleaning solution, with supporting calculations. For cleaning solutions that are used as purchased, the manufacturer's specifications for VOM content may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in
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Section 219.105(a) of this Part:

C) For each batch of cleaning solution for which the owner or operator relies on the vapor pressure of the cleaning solution to demonstrate compliance with Section 219.407(a)(4)(B) of this Subpart:

i) The name and identification of each cleaning solution;

ii) Date and time of preparation, and each subsequent modification, of the batch;

iii) The molecular weight, density, and VOM composite partial vapor pressure of each cleaning solvent, as determined in accordance with Section 219.409(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer's specifications for VOM composite partial vapor pressure may be used if such manufacturer's specifications are based on results of tests conducted in accordance with methods specified in Sections 219.105(a) and 219.110 of this Part;

iv) The total amount of each cleaning solvent used to prepare the as-used cleaning solution; and

v) The VOM composite partial vapor pressure of each as-used cleaning solution, as determined in accordance with Section 219.409(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer’s specifications for VOM composite partial vapor pressure may be used if such manufacturer’s specifications are based on results of tests conducted in accordance with methods specified in Sections 219.105(a) and 219.110 of this Part;

D) The date, time and duration of scheduled inspections performed to confirm the proper use of closed containers to control VOM emissions, and any instances of improper use of closed containers, with descriptions of actual practice and corrective action taken, if any;
3) **Notify** On and after March 15, 1996, notify the Agency in writing of any violation of Section 219.407 of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation.  

4) If changing its method of demonstrating compliance with the requirements of Section 219.407(a)(4) of this Subpart, or changing between automatic and manual methods of preparing cleaning solutions, certify compliance for such new method in accordance with subsection (d)(1) of this Section, within 30 days after making such change, and perform all tests and calculations necessary to demonstrate that such printing line(s) will be in compliance with the applicable requirements of Section 219.407(a)(4) of this Subpart.

g) The owner or operator of lithographic printing lines subject to one or more of the exclusions set forth in Section 219.405(c)(3) shall:

1) By May 1, 2010, or upon initial start-up of a new lithographic printing line that is subject to one or more of the exclusions set forth in Section 219.405(c)(3), whichever is later, submit a certification to the Agency that includes either:

   A) A declaration that the source is subject to one or more of the exclusions set forth in Section 219.405(c)(3) and a statement indicating which such exclusions apply to the source; or

   B) A declaration that the source will not make use of any of the exclusions set forth in Section 219.405(c)(3);

2) Unless the source has certified in accordance with subsection (g)(1)(B) of this Section that it will not make use of any of the exclusions set forth in Section 219.405(c)(3):

   A) Collect and record the following information for all lithographic printing lines at the source:

      i) Calculations that demonstrate that combined emissions of VOM from all lithographic printing lines (including inks,
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1) Provisions for calculation of emissions from heatset web offset lithographic printing operations. To calculate VOM emissions from heatset web offset

ii) The amount of cleaning materials used on lithographic printing lines at the source that does not comply with the cleaning material limitations in Section 219.407(a)(4) of this Subpart;

B) Notify the Agency in writing if the combined emissions of VOM from all lithographic printing lines (including inks, fountain solutions, and solvents used for cleanup operations associated with the lithographic printing lines) at the source ever exceed 45.5 kg/day (100 lbs/day), before the use of capture systems and control devices, within 30 days after the event occurs;

3) If changing from utilization of the exclusions set forth in Section 219.405(c)(3) to opting out of such exclusions pursuant to subsection (g)(1)(B) of this Section, or if there is a change at the source such that the exclusions no longer apply, certify compliance in accordance with subsection (g)(1)(B) of this Section within 30 days after making such change, and perform all tests and calculations necessary to demonstrate that such printing lines will be in compliance with the applicable requirements of Section 219.407 of this Subpart;

4) If changing from opting out of the exclusions set forth in Section 219.405(c)(3) pursuant to subsection (g)(1)(B) of this Section to utilization of such exclusions, certify compliance in accordance with subsection (g)(1)(A) of this Section within 30 days after making such change.

he) The owner or operator shall maintain all records required by this Section at the source for a minimum period of three years and shall make all records available to the Agency upon request.

i) Provisions for calculation of emissions from heatset web offset lithographic printing operations. To calculate VOM emissions from heatset web offset
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lithographic printing operations for purposes other than the applicability thresholds specified in Section 219.405 of this Subpart, sources may use the following emission adjustment factors (for Annual Emissions Reports or permit limits, for example):

1) A factor of 0.80 may be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines;

2) To determine VOM emissions from fountain solutions that contain no alcohol, an emission adjustment factor may be used to account for carryover into the dryer, except when using an impervious substrate. The VOM emitted from the fountain solution shall be calculated using the following equation:

\[ Vom_{fs} = 0.30 \times Vom_{tot} + 0.70 \times Vom_{tot} \times \frac{1}{DE} \]

where:

\[ VOM_{tot} = \text{Total VOM in the fountain solution;} \]
\[ VOM_{fs} = \text{Total number of coatings applied in the can coating operation, i.e. all can coating lines at the source;} \]
\[ VOM_{fs} = \text{VOM emitted from the fountain solution;} \]
\[ DE = \text{Destruction efficiency of the control device on the associated dryer, in decimal form (i.e., 95% control is represented as 0.95). If no control device is present, DE = 0;} \]

For fountain solutions that contain alcohol, impervious substrates such as metal or plastic, or non-heatset lithographic presses, no emission adjustment factor is used;

3) To determine VOM emissions from cleaning solutions used on heatset web offset lithographic printing lines at the source, an emission
adjustment factor of 0.50 may be used in calculating emissions from used shop towels if the VOM composite vapor pressure of each associated cleaning solution is less than 10 mmHg measured at 20°C (68°F) and the shop towels are kept in closed containers. To determine VOM emissions from automatic blanket wash solution with a VOM composite vapor pressure of less than 10 mmHg measured at 20°C (68°F), an emission adjustment factor may be used to account for carryover into the dryer, except when using an impervious substrate. The VOM emitted from the automatic blanket wash solution shall be calculated using the following equation:

\[ V_{bw} = 0.60 \times V_{tot} + 0.40 \times V_{tot} \times DE \]

where:

- \( V_{OM_{tot}} \) = Total VOM in the blanket wash;
- \( V_{OM_{bw}} \) = VOM emitted from the blanket wash;
- \( DE \) = Destruction efficiency of the control device on the associated dryer, in decimal form (i.e., 95% control is represented as 0.95). If no control device is present, \( DE = 0 \);

For cleaning solutions with VOM composite vapor pressures of equal to or greater than 10 mmHg measured at 20°C (68°F), for shop towels that are not kept in closed containers, and for impervious substrates such as metal or plastic, no emission adjustment factor is used.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

**Section 219.412 Letterpress Printing Lines: Applicability**

a) Except as provided in subsection (b) of this Section, on and after May 1, 2010, the limitations in Sections 219.413 through 219.416 of this Subpart shall apply to:

1) All heatset web letterpress printing lines at a source if all heatset web letterpress printing lines (including solvents used for cleanup operations associated with heatset web letterpress printing lines) at the source have a total potential to emit 22.7 Mg (25 tons) or more of VOM per year; and
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2) All letterpress printing lines at a source where the combined emissions of VOM from all letterpress printing lines at the source (including solvents used for cleanup operations associated with the letterpress printing lines) ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, calculated in accordance with Section 219.417(b)(1)(B).

b) Notwithstanding subsection (a) of this Section, the requirements of Section 219.413(a)(2) of this Subpart shall not apply to up to 416.3 liters (110 gallons) per year of cleaning materials used on letterpress printing lines at a subject source.

c) On and after May 1, 2010, the recordkeeping and reporting requirements in Section 219.417 of this Subpart shall apply to all owners or operators of letterpress printing lines.

d) If a letterpress printing line at a source is or becomes subject to one or more of the limitations in Section 219.413 of this Subpart, the letterpress printing lines at the source are always subject to the applicable provisions of this Subpart.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 219.413 Emission Limitations and Control Requirements for Letterpress Printing Lines

a) No owner or operator of letterpress printing lines subject to the requirements of this Subpart shall:

1) Cause or allow the operation of any heatset web letterpress printing line that meets the applicability requirements of Section 219.412(a)(1) unless:

A) The air pressure in the dryer is maintained lower than the air pressure of the press room, such that air flow through all openings in the dryer, other than the exhaust, is into the dryer at all times when the printing line is operating;

B) An afterburner is installed and operated so that VOM emissions (excluding methane and ethane) from the press dryer exhausts are reduced as follows:
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i) By 90 percent, by weight, for afterburners first constructed at the source prior to January 1, 2010;

ii) By 95 percent, by weight, for afterburners first constructed at the source on or after January 1, 2010; or

iii) To a maximum afterburner exhaust outlet concentration of 20 ppmv (as carbon);

C) The afterburner complies with all monitoring provisions specified in Section 219.416(a) of this Subpart; and

D) The afterburner is operated at all times when the printing line is in operation, except the afterburner may be shut down between November 1 and April 1 as provided in Section 219.107 of this Part;

2) Cause or allow the use of a cleaning solution on any letterpress printing line unless:

A) The VOM content of the as-used cleaning solution is less than or equal to 70 percent, by weight; or

B) The VOM composite partial vapor pressure of the as-used cleaning solution is less than 10 mmHg at 20° C (68° F);

3) Cause or allow VOM-containing cleaning materials, including used cleaning towels, associated with any letterpress printing line to be kept, stored, or disposed of in any manner other than in closed containers, except when specifically in use.

b) An owner or operator of a heatset web letterpress printing line subject to the requirements of subsection (a)(1)(B) of this Section may use a control device other than an afterburner, if:

1) The control device reduces VOM emissions from the press dryer exhausts as follows:
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A) By 90 percent, by weight, for control devices first constructed at the source prior to January 1, 2010;

B) By 95 percent, by weight, for control devices first constructed at the source on or after January 1, 2010; or

C) To a maximum control device exhaust outlet concentration of 20 ppmv (as carbon);

2) The owner or operator submits a plan to the Agency detailing appropriate monitoring devices, test methods, recordkeeping requirements, and operating parameters for the control device; and

3) The use of the control device in accordance with this plan is approved by the Agency and USEPA as federally enforceable permit conditions.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 219.415 Testing for Letterpress Printing Lines

a) Testing to demonstrate compliance with the requirements of Section 219.413 of this Subpart shall be conducted by the owner or operator within 90 days after a request by the Agency, or as otherwise specified in this Subpart. Such testing shall be conducted at the expense of the owner or operator, and the owner or operator shall notify the Agency in writing 30 days in advance of conducting such testing to allow the Agency to be present during such testing.

b) The methods and procedures of Section 219.105(d) and (f) shall be used for testing to demonstrate compliance with the requirements of Section 219.413(a)(1)(B) or (b)(1) of this Subpart, as follows:

1) To select the sampling sites, Method 1 or 1A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 219.112 of this Part. The sampling sites for determining efficiency in reducing VOM from the dryer exhaust shall be located between the dryer exhaust and the control device inlet, and between the outlet of the control device and the exhaust to the atmosphere:
2) To determine the volumetric flow rate of the exhaust stream, Method 2, 2A, 2C, or 2D, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 219.112 of this Part;

3) To determine the VOM concentration of the exhaust stream entering and exiting the control device, Method 25 or 25A, as appropriate, 40 CFR 60, Appendix A, incorporated by reference in Section 219.112 of this Part. For thermal and catalytic afterburners, Method 25 must be used except under the following circumstances, in which case Method 25A must be used:

A) The allowable outlet concentration of VOM from the control device is less than 50 ppmv, as carbon;

B) The VOM concentration at the inlet of the control device and the required level of control result in exhaust concentrations of VOM of 50 ppmv, or less, as carbon; and

C) Due to the high efficiency of the control device, the anticipated VOM concentration at the control device exhaust is 50 ppmv or less, as carbon, regardless of inlet concentration. If the source elects to use Method 25A under this option, the exhaust VOM concentration must be 50 ppmv or less, as carbon, and the required destruction efficiency must be met for the source to have demonstrated compliance. If the Method 25A test results show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, a retest is required. The retest shall be conducted using either Method 25 or Method 25A. If the retest is conducted using Method 25A and the test results again show that the required destruction efficiency apparently has been met, but the exhaust concentration is above 50 ppmv, as carbon, the source must retest using Method 25;

4) Notwithstanding the criteria or requirements in Method 25 which specifies a minimum probe temperature of 129° C (265° F), the probe must be heated to at least the gas stream temperature of the dryer exhaust, typically close to 176.7° C (350° F);
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5) During testing, the printing lines shall be operated at representative operating conditions and flow rates; and

6) During testing, an air flow direction indicating device, such as a smoke stick, shall be used to demonstrate 100 percent emissions capture efficiency for the dryer in accordance with Section 219.413(a)(1)(A) of this Subpart.

c) Testing to demonstrate compliance with the VOM content limitations in Section 219.413(a)(2)(A) of this Subpart, and to determine the VOM content of cleaning solvents, cleaning solutions, and inks (pursuant to the requirements of Section 219.417(b)(1)(B) of this Subpart), shall be conducted upon request of the Agency, or as otherwise specified in this Subpart, as follows:

1) The applicable test methods and procedures specified in Section 219.105(a) of this Part shall be used; provided, however, Method 24, incorporated by reference in Section 219.112 of this Part, shall be used to demonstrate compliance; or

2) The manufacturer's specifications for VOM content for cleaning solvents and inks may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 219.105(a) of this Part; provided, however, Method 24 shall be used to determine compliance.

d) Testing to demonstrate compliance with the requirements of Section 219.413(b) of this Subpart shall be conducted as set forth in the owner or operator’s plan approved by the Agency and USEPA as federally enforceable permit conditions pursuant to Section 219.413(b) of this Subpart.

e) Testing to determine the VOM composite partial vapor pressure of cleaning solvents, cleaning solvent concentrates, and as-used cleaning solutions shall be conducted in accordance with the applicable methods and procedures specified in Section 219.110 of this Part.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 219.416 Monitoring Requirements for Letterpress Printing Lines
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a) Afterburners for heatset web letterpress printing lines. If an afterburner is used to demonstrate compliance, the owner or operator of a heatset web letterpress printing line subject to Section 219.413(a)(1)(B) of this Subpart shall:

1) Install, calibrate, maintain, and operate temperature monitoring devices with an accuracy of 3°C or 5°F on the afterburner in accordance with Section 219.105(d)(2) of this Part and in accordance with the manufacturer's specifications. Monitoring shall be performed at all times when the afterburner is operating; and

2) Install, calibrate, operate, and maintain, in accordance with manufacturer's specifications, a continuous recorder on the temperature monitoring devices, such as a strip chart, recorder or computer, with at least the same accuracy as the temperature monitor.

b) Other control devices for heatset web letterpress printing lines. If a control device other than an afterburner is used to demonstrate compliance, the owner or operator of a heatset web letterpress printing line subject to this Subpart shall install, maintain, calibrate, and operate such monitoring equipment as set forth in the owner or operator's plan approved by the Agency and USEPA pursuant to Section 219.413(b) of this Subpart.

c) Cleaning solution.

1) The owner or operator of any letterpress printing line relying on the VOM content of the cleaning solution to comply with Section 219.413(a)(2)(A) of this Subpart must:

A) For cleaning solutions that are prepared at the source with equipment that automatically mixes cleaning solvent and water (or other non-VOM):

i) Install, operate, maintain, and calibrate the automatic feed equipment in accordance with manufacturer's specifications to regulate the volume of each of the cleaning solvent and water (or other non-VOM), as mixed; and

ii) Pre-set the automatic feed equipment so that the consumption rates of the cleaning solvent and water (or
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other non-VOM), as applied, comply with Section 219.413(a)(2)(A) of this Subpart;

B) For cleaning solutions that are not prepared at the source with automatic feed equipment, keep records of the usage of cleaning solvent and water (or other non-VOM) as set forth in Section 219.417(c)(2) of this Subpart.

2) The owner or operator of any letterpress printing line relying on the vapor pressure of the cleaning solution to comply with Section 219.413(a)(2)(B) of this Subpart must keep records for such cleaning solutions used on any such lines as set forth in Section 219.417(e)(2)(C) of this Subpart.

(Source: Added at 34 Ill. Reg. _____, effective ____________)

Section 219.417  Recordkeeping and Reporting for Letterpress Printing Lines

a) By May 1, 2010, or upon initial start-up of a new heatset web letterpress printing line, whichever is later, and upon modification of a heatset web letterpress printing line, an owner or operator of a heatset web letterpress printing line exempt from any of the limitations of Section 219.413 of this Subpart because of the criteria in Section 219.412(a)(1) shall submit a certification to the Agency that includes:

1) A declaration that the source is exempt from the requirements in Section 219.413 of this Subpart because of the criteria in Section 219.412(a)(1) of this Subpart;

2) Calculations which demonstrate that the source's total potential to emit VOM does not equal or exceed 22.7 Mg (25 tons) per year.

b) An owner or operator of a letterpress printing line exempt from any of the limitations of Section 219.413 of this Subpart because of the criteria in Section 219.412(a)(2) shall:

1) By May 1, 2010, or upon initial start-up of a new letterpress printing line, whichever is later, and upon modification of a letterpress printing line, submit a certification to the Agency that includes the information specified
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in either subsections (b)(1)(A) through (b)(1)(C) of this Section, or subsections (b)(1)(A) and (b)(1)(D) of this Section, as applicable:

A) A declaration that the source is exempt from the control requirements in Section 219.413 of this Part because of the criteria in Section 219.412(a)(2) of this Subpart;

B) Calculations that demonstrate that combined emissions of VOM from all letterpress printing lines (including inks and solvents used for cleanup operations associated with the letterpress printing lines) at the source never equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, as follows:

i) To calculate daily emissions of VOM, the owner or operator shall determine the monthly emissions of VOM from all letterpress printing lines at the source (including solvents used for cleanup operations associated with the letterpress printing lines) and divide this amount by the number of days during that calendar month that letterpress printing lines at the source were in operation;

ii) To determine the VOM content of the inks and cleaning solvents, the tests methods and procedures set forth in Section 219.415(c) of this Subpart shall be used;

iii) To determine VOM emissions from inks used on letterpress printing lines at the source, an ink emission adjustment factor of 0.05 shall be used in calculating emissions from all non-heatset inks except when using an impervious substrate, and a factor of 0.80 shall be used in calculating emissions from all heatset inks to account for VOM retention in the substrate except when using an impervious substrate. For impervious substrates such as metal or plastic, no emission adjustment factor is used. The VOM content of the ink, as used, shall be multiplied by this factor to determine the amount of VOM emissions from the use of ink on the printing lines; and
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iv) To determine VOM emissions from cleaning solutions used on letterpress printing lines at the source, an emission adjustment factor of 0.50 shall be used in calculating emissions from used shop towels if the VOM composite vapor pressure of each associated cleaning solution is less than 10 mmHg measured at 20°C (68°F) and the shop towels are kept in closed containers. Otherwise, no retention factor is used;

C) A description and the results of all tests used to determine the VOM content of inks and cleaning solvents, and a declaration that all such tests have been properly conducted in accordance with Section 219.415(c)(1) of this Subpart;

D) As an alternative to the calculations in subsection (b)(1)(B), a statement that the source uses less than the amount of material specified in subsection (b)(1)(D)(i) or (b)(1)(D)(ii), as applicable, during each calendar month. A source may determine that it emits below 6.8 kg/day (15 lbs/day) of VOM based upon compliance with such material use limitations. If the source exceeds this amount of material use in a given calendar month, the owner or operator must, within 15 days of the end of that month, complete the emissions calculations of subsection (b)(1)(B) to determine daily emissions for applicability purposes. If the source ever exceeds this amount of material use for six consecutive calendar months, it is no longer eligible to use this subsection as an alternative to the calculations in subsection (b)(1)(B). If a source has both heatset web and either nonheatset web or sheetfed letterpress printing operations, or has all three types of printing operations, the owner or operator may not make use of this alternative and must use the calculations in subsection (b)(1)(B);

i) The sum of all sheetfed and nonheatset web letterpress printing operations at the source: 242.3 liters (64 gallons) of cleaning solvent; or

ii) The sum of all heatset web letterpress printing operations at the source: 204.1 kg (450 lbs) of ink and cleaning solvent;
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2) For sources complying with subsection (b)(1)(B) of this Section, notify the Agency in writing if the combined emissions of VOM from all letterpress printing lines (including inks and solvents used for cleanup operations associated with the letterpress printing lines) at the source ever equal or exceed 6.8 kg/day (15 lbs/day), in the absence of air pollution control equipment, within 30 days after the event occurs;

3) For sources complying with subsection (b)(1)(D) of this Section, comply with the following:

A) Maintain material use records showing that the source uses less than the amount of material specified in subsections (b)(1)(D)(i) and (b)(1)(D)(ii) during each calendar month, or, if the source exceeds the material use limitations, records showing that the source exceeded the limitations but did not emit 6.8 kg/day (15 lbs/day) or more of VOM;

B) Notify the Agency in writing if the source exceeds the material use limitations for six consecutive calendar months, or if the source changes its method of compliance from subsection (b)(1)(D) to subsection (b)(1)(B) of this Section, within 30 days after the event occurs;

c) Unless complying with subsection (b)(1)(D) and (b)(3) of this Section, on and after May 1, 2010, an owner or operator of a letterpress printing line subject to the requirements in subsections (a) or (b) of this Section shall collect and record either the information specified in subsection (c)(1) or (c)(2) of this Section for all letterpress printing lines at the source:

1) Standard recordkeeping, including the following:

A) The name and identification of each letterpress ink and cleaning solvent used on any letterpress printing line, recorded each month;

B) A daily record that shows whether a letterpress printing line at the source was in operation on that day;
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C) The VOM content and the volume of each letterpress ink and cleaning solvent used on any letterpress printing line, recorded each month;

D) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each cleaning solvent and letterpress ink (with the applicable ink VOM emission adjustment) used at the source, calculated each month; and

E) The VOM emissions in lbs/day for the month, calculated in accordance with Section 219.417(b)(1)(B) of this Subpart;

2) Purchase and inventory recordkeeping, including the following:

A) The name, identification, and VOM content of each letterpress ink and cleaning solvent used on any letterpress printing line, recorded each month;

B) Inventory records from the beginning and end of each month indicating the total volume of each letterpress ink, and cleaning solvent to be used on any letterpress printing line at the source;

C) Monthly purchase records for each letterpress ink and cleaning solvent used on any letterpress printing line at the source;

D) A daily record that shows whether a letterpress printing line at the source was in operation on that day;

E) The total VOM emissions at the source each month, determined as the sum of the product of usage and VOM content for each cleaning solvent and letterpress ink (with the applicable ink VOM emission adjustment factor) used at the source, calculated each month based on the monthly inventory and purchase records required to be maintained pursuant to subsections (c)(2)(A), (c)(2)(B), and (c)(2)(C) of this Section; and

F) The VOM emissions in lbs/day for the month, calculated in accordance with Section 219.417(b)(1)(B) of this Subpart;
d) An owner or operator of a heatset web letterpress printing lines subject to the control requirements of Section 219.413(a)(1)(B) or (b)(1) of this Subpart shall comply with the following:

1) By May 1, 2010, or upon initial start-up of a new printing line, whichever is later, and upon initial start-up of a new control device for a heatset web printing line, submit a certification to the Agency that includes the following:

A) An identification of each heatset web letterpress printing line at the source;

B) A declaration that each heatset web letterpress printing line is in compliance with the requirements of Section 219.413(a)(1) or (b) of this Subpart, as appropriate;

C) The type of afterburner or other approved control device used to comply with the requirements of Section 219.413(a)(1)(B) or (b)(1) of this Subpart, and the date that such device was first constructed at the subject source;

D) The control requirements in Section 219.413(a)(1)(B) or (b)(1) of this Subpart with which the letterpress printing line is complying;

E) The results of all tests and calculations necessary to demonstrate compliance with the control requirements of Section 219.413(a)(1)(B) or (b)(1) of this Subpart, as applicable; and

F) A declaration that the monitoring equipment required under Section 219.413(a)(1)(C) or (b) of this Subpart, as applicable, has been properly installed and calibrated according to manufacturer's specifications;

2) If testing of the afterburner or other approved control device is conducted pursuant to Section 219.415(b) of this Subpart, the owner or operator shall, within 90 days after conducting such testing, submit a copy of all test results to the Agency and shall submit a certification to the Agency that includes the following:
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A) A declaration that all tests and calculations necessary to demonstrate whether the letterpress printing lines is in compliance with Section 219.413(a)(1)(B) or (b)(1) of this Subpart, as applicable, have been properly performed;

B) A statement whether the heatset web letterpress printing lines is or is not in compliance with Section 219.413(a)(1)(B) or (b)(1) of this Subpart, as applicable; and

C) The operating parameters of the afterburner or other approved control device during testing, as monitored in accordance with Section 219.416(a) or (b) of this Subpart, as applicable;

3) Except as provided in subsection (d)(3)(D) of this Section, collect and record daily the following information for each heatset web letterpress printing line subject to the requirements of Section 219.413(a)(1)(B) or (b)(1) of this Subpart:

A) Afterburner or other approved control device monitoring data in accordance with Section 219.416(a) or (b) of this Subpart, as applicable;

B) A log of operating time for the afterburner or other approved control device, monitoring equipment, and the associated printing line;

C) A maintenance log for the afterburner or other approved control device and monitoring equipment detailing all routine and non-routine maintenance performed, including dates and duration of any outages; and

D) A log detailing checks on the air flow direction or air pressure of the dryer and press room to ensure compliance with the requirements of Section 219.413(a)(1)(A) of this Subpart at least once per calendar month while the line is operating;

4) Notify the Agency in writing of any violation of Section 219.413(a)(1)(B) or (b)(1) of this Subpart within 30 days after the occurrence of such
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violation. Such notification shall include a copy of all records of such violation;

5) If changing the method of compliance between Sections 219.413(a)(1)(B) and 219.413(b) of this Subpart, certify compliance for the new method of compliance in accordance with Section 219.413(b) at least 30 days before making such change, and perform all tests and calculations necessary to demonstrate that such printing lines will be in compliance with the requirements of Section 219.413(a)(1) of this Subpart, or Section 219.413(b) of this Subpart, as applicable.

e) For letterpress printing line cleaning operations, an owner or operator of a letterpress printing line subject to the requirements of Section 219.413 of this Subpart shall:

1) By May 1, 2010, or upon initial start-up of a new letterpress printing line, whichever is later, certify to the Agency that all cleaning solutions, other than those excluded pursuant to Section 219.412(b), and the handling of all cleaning materials will be in compliance with the requirements of Section 219.413(a)(2)(A) or (a)(2)(B) and (a)(3) of this Subpart. Such certification shall include:

A) A statement that the cleaning solution will comply with the limitations in Section 219.413(a)(2);

B) Identification of the methods that will be used to demonstrate continuing compliance with the applicable limitations;

C) A sample of the records that will be kept pursuant to Section 219.417(e)(2) of this Subpart; and

D) A description of the practices that ensure that VOM-containing cleaning materials are kept in closed containers;

2) Collect and record the following information for each cleaning solution used on each letterpress printing line:

A) For each cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section
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219.413(a)(2)(A) of this Subpart and that is prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 219.415(c) of this Subpart;

iii) Each change to the setting of the automatic equipment, with date, time, description of changes in the cleaning solution constituents (e.g., cleaning solvents), and a description of changes to the proportion of cleaning solvent and water (or other non-VOM);

iv) The proportion of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution;

v) The VOM content of the as-used cleaning solution, with supporting calculations; and

vi) A calibration log for the automatic equipment, detailing periodic checks;

B) For each batch of cleaning solution for which the owner or operator relies on the VOM content to demonstrate compliance with Section 219.413(a)(2)(A) of this Subpart, and that is not prepared at the source with automatic equipment:

i) The name and identification of each cleaning solution;

ii) Date and time of preparation, and each subsequent modification, of the batch;

iii) The VOM content of each cleaning solvent in the cleaning solution, as determined in accordance with Section 219.415(c) of this Subpart;
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iv) The total amount of each cleaning solvent and water (or other non-VOM) used to prepare the as-used cleaning solution; and

v) The VOM content of the as-used cleaning solution, with supporting calculations. For cleaning solutions that are used as purchased, the manufacturer's specifications for VOM content may be used if such manufacturer's specifications are based on results of tests of the VOM content conducted in accordance with methods specified in Section 219.105(a) of this Part;

C) For each batch of cleaning solution for which the owner or operator relies on the vapor pressure of the cleaning solution to demonstrate compliance with Section 219.413(a)(2)(B) of this Subpart:

i) The name and identification of each cleaning solution;

ii) Date and time of preparation, and each subsequent modification, of the batch;

iii) The molecular weight, density, and VOM composite partial vapor pressure of each cleaning solvent, as determined in accordance with Section 219.415(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer's specifications for VOM composite partial vapor pressure may be used if such manufacturer's specifications are based on results of tests conducted in accordance with methods specified in Sections 219.105(a) and 219.110 of this Part;

iv) The total amount of each cleaning solvent used to prepare the as-used cleaning solution; and

v) The VOM composite partial vapor pressure of each as-used cleaning solution, as determined in accordance with Section 219.415(e) of this Subpart. For cleaning solutions that are used as purchased, the manufacturer's specifications for
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VOM composite partial vapor pressure may be used if such manufacturer's specifications are based on results of tests conducted in accordance with methods specified in Sections 219.105(a) and 219.110 of this Part.

D) The date, time, and duration of scheduled inspections performed to confirm the proper use of closed containers to control VOM emissions, and any instances of improper use of closed containers, with descriptions of actual practice and corrective action taken, if any;

E) The amount of cleaning materials used on letterpress printing lines at the source that do not comply with the cleaning material limitations set forth in Section 219.413(a)(2) of this Subpart;

3) Notify the Agency in writing of any violation of Section 219.413 of this Subpart within 30 days after the occurrence of such violation. Such notification shall include a copy of all records of such violation.

f) The owner or operator shall maintain all records required by this Section at the source for a minimum period of three years and shall make all records available to the Agency upon request.

(Source: Added at 34 Ill. Reg. _____, effective ____________.)
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1) **Heading of the Part**: Regionalized Perinatal Health Care Code

2) **Code Citation**: 77 Ill. Adm. Code 640

3) **Section Numbers**: **Proposed Action**:

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640.APPENDIX K  New
640.APPENDIX L  New
640.APPENDIX M  New
640.APPENDIX N  New
640.APPENDIX O  New

4) Statutory Authority: Implementing and authorized by the Developmental Disability Prevention Act [410 ILCS 250]

5) A Complete Description of the Subjects and Issues Involved: Over the years the accepted standard of care has changed and the verbiage has become quite different. This change in the now accepted standard constitutes the need to update several Sections of Part 640.

Section 640.10 (Scope) is being repealed because the language is not regulatory and is not needed in the rules.

Section 640.20 (Definition) is being amended to add new definitions that reflect current acceptable standards in medical practice.

Section 640.25 (Incorporated Materials) is being amended to include current State statutes and rules and association standards that are referenced and incorporated in Part 640.

Section 640.30 (Perinatal Advisory Committee) is being amended to revise the composition and responsibilities of the Committee.

Section 640.40 (Standards for Perinatal Care) is being amended to include non-birthing center information, to update the current levels of perinatal care provided in Illinois, and to include a new provision that requires hospitals to inform the Department of a loss of essential resources.

Section 640.41 (Level I- Standards for Perinatal Care), Section 640.42 (Level II and Level II with Extended Capabilities – Standards for Perinatal Care), and Section 640.43 (Level III – Standards for Perinatal Care) are being amended to reflect the current accepted language, trends, practices and standards outlined at those levels of care, including continuing education requirements, the content of the letter of agreement with the hospital's Administrative Perinatal Center, and incorporation of the American College of Obstetricians and Gynecologists "Guidelines for Perinatal Care." Existing language is being revised for clarification and consistency. Application for Designation requirements
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are set forth. Provisions for designation with "exceptions" are being repealed. Hospitals must meet all requirements for the level of care for which they are applying.

Section 640.44 (Perinatal Center) is being amended to reflect changes in the name and the responsibilities of the Administrative Perinatal Center, including establishment of a Joint Mortality and Morbidity Review Committee.

Section 640.45 (Agency Action) is being amended to clarify the Department's responsibility for oversight of the designation process.

Section 640.50 (Designation and Re-designation of Level I, Level II, Level II with Extended Capabilities, and Level III Perinatal Facilities) is being amended to reflect changes in the Department's designation process.

Section 640.60 (Information for Facility Designation and Re-designation as Level I, Level II, Level II with Extended Capabilities, and Level III Perinatal Facilities and Assurance required of Applicants) is being amended to make technical changes in the application process requirements and to add procedural steps for a change in network affiliation.

Section 640.70 (Minimum Components for Letters of Agreements Between Level I, Level II, Level II with Extended Capabilities, or Level III Perinatal Facilities and Their Administrative Perinatal Center) is being amended to update the requirements for the letter of agreement.

Section 640.80 (Regional Perinatal Networks -- Composition and Funding) is being amended to reflect changes in funding for regional perinatal networks.

Section 640.90 (State Perinatal Reporting System) is being amended to reflect changes in reporting requirements.

Section 640.100 (High-Risk Follow-up Program) is being repealed because certified local health departments no longer perform this function.

Section 640.Appendix A (Standardized Perinatal Site Visit Protocol) is being amended to promote accuracy and collection of meaningful data and information without redundancy.

Section 640.Appendix B (Outcome Oriented Data Form) and its Exhibits are being repealed because these data are not longer being collected.
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Section 640.Appendix C (Maternal Discharge Record) and its Exhibits are being repealed because the data collection is not associated with any statistical or follow-up purpose.

Section 640.Appendix F (Report of Local Health, Infant) and its Exhibits are being repealed because resources are no longer available at the certified local health department level to do in-home follow-up.

Section 640.Appendix G (Sample Letter of Agreement) is being amended to reflect changes in the rules.

Section 640.Appendix H (Written protocol for Referral/Transfer/Transport) and its exhibits are being amended to reflect the changes in the rules.

Section 640.Appendix I (Perinatal Reporting System Data Elements) is being amended to reflect more current ethnicity and to include new neonatal complications.

Section 640.Appendix J (Guideline for application Process for Designation, Redesignation or Change in Designation) is being added to delineate to hospitals the steps to be taken in the application process for designation, re-designation, or change in designation as it applies to the Perinatal Program.

Section 640.Appendix K (Elements for Submission for Designation, Redesignation or Change in Designation) is being added to describe to hospitals the elements that must be included in applying for designation, re-designation, or change in designation of the perinatal program.

Section 640.Appendix L (Level I Resource Checklist), Section 640.Appendix M (Level II Resource Checklist), Section 640.Appendix N (Level II with Extended Neonatal Capabilities Resource Checklist), and Section 640.Appendix O (Level III Resource Checklist) are being added to outline areas of focus and to provide a means of describing institutional compliance.

6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: None

7) Will this rulemaking replace any emergency rulemaking currently in effect?  No

8) Does this rulemaking contain an automatic repeal date? No
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9) Does this rulemaking contain incorporations by reference? Yes

10) Are there any other proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives: This rulemaking does not create or expand a State mandate.

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Interested persons may present their comments concerning this rulemaking within 45 days after the publication of this issue of the Illinois Register to:

   Susan Meister
   Division of Legal Services
   Illinois Department of Public Health
   535 W. Jefferson St., 5th floor
   Springfield, Illinois 62761

   217/782-2043
   E-mail: dph.rules@illinois.gov

13) Initial Regulatory Flexibility Analysis:

   A) Type of small businesses, small municipalities and not for profit corporations affected: Perinatal centers

   B) Reporting, bookkeeping or other procedures required for compliance: Reporting procedures are set forth in the proposed amendments.

   C) Types of professional skills necessary for compliance: Medical, nursing, administrative

14) Regulatory Agenda on which this rulemaking was summarized: July 2009

The full text of the Proposed Amendments begins on the next page:
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TITLE 77: PUBLIC HEALTH
CHAPTER I: DEPARTMENT OF PUBLIC HEALTH
SUBCHAPTER I: MATERNAL AND CHILDCARE

PART 640
REGIONALIZED PERINATAL HEALTH CARE CODE

Section
640.10 Scope (Repealed)
640.20 Definitions
640.25 Incorporated and Referenced Materials
640.30 Perinatal Advisory Committee
640.40 Standards for Perinatal Care
640.41 Level I – Standards for Perinatal Care
640.42 Level II and Level II with Extended Neonatal Capabilities – Standards for Perinatal Care
640.43 Level III – Standards for Perinatal Care
640.44 Administrative Perinatal Center
640.45 Department of Public Health Agency Action
640.50 Designation and Redesignation of Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities, and Level III Perinatal Hospitals and Administrative Perinatal Centers Facilities
640.60 Application Information for Hospital Facility Designation or Redesignation as a Non-Birthing Center Level I, Level II, Level II with Extended Neonatal Capabilities, and Level III Perinatal Hospital and Administrative Perinatal Center Facilities and Assurances Required of Applicants
640.70 Minimum Components for Letters of Agreement Between Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities, or Level III Perinatal Hospitals Facilities and Their Administrative Perinatal Center
640.80 Regional Perinatal Networks – Composition and Funding
640.90 State Perinatal Reporting System
640.100 High-Risk Follow-up Program (Repealed)
640.APPENDIX A Standardized Perinatal Site Visit Protocol
640.APPENDIX B Outcome Oriented Data: Perinatal Facility Designation/Redesignation (Repealed)
640.EXHIBIT A Outcome Oriented Data Form (Repealed)
640.EXHIBIT B Data Collection Exception Form (Repealed)
640.APPENDIX C Maternal Discharge Record (Repealed)
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640.EXHIBIT A  Maternal Discharge Record Form (Repealed)
640.EXHIBIT B  Instructions for Completing Maternal Discharge Record (Repealed)

640.APPENDIX D  Report of Local Health Nurse, Maternal – Prenatal (Repealed)
640.EXHIBIT A  Local Health Nurse, Maternal – Prenatal Form (Repealed)
640.EXHIBIT B  Instructions for Completing the Report of Local Health Nurse, Maternal – Prenatal (Repealed)

640.APPENDIX E  Report of Local Health Nurse, Maternal – Postnatal (Repealed)
640.EXHIBIT A  Local Health Nurse, Maternal – Postnatal Form (Repealed)
640.EXHIBIT B  Instruction for Completing the Report of Local Health Nurse, Maternal – Postnatal (Repealed)

640.APPENDIX F  Report of Local Health Nurse, Infant (Repealed)
640.EXHIBIT A  Local Health Nurse, Infant Form (Repealed)
640.EXHIBIT B  Instructions for Completing the Report of Local Health Nurse, Infant (Repealed)

640.APPENDIX G  Sample Letter of Agreement
640.APPENDIX H  Written Protocol for Referral/Transfer/Transport
640.EXHIBIT A  Level I: Patients for consultation with __________________ (Level III hospital facility or Administrative Perinatal Center)
640.EXHIBIT B  Level II: Patients for consultation with or transfer to __________________ (Level III hospital facility or Administrative Perinatal Center)
640.EXHIBIT C  Level I: Maternal and neonatal Neonatal patients to be cared for at __________________ hospital (Level III hospital facility or Administrative Perinatal Center)
640.EXHIBIT D  Level II: Maternal and neonatal Neonatal patients to be cared for at __________________ hospital (Level III hospital facility or Administrative Perinatal Center)

640.APPENDIX I  Perinatal Reporting System Data Elements
640.APPENDIX J  Guideline for Application Process for Designation, Redesignation or Change in Designation
640.APPENDIX K  Elements for Submission for Designation, Redesignation or Change in Designation
640.APPENDIX L  Level I Resource Checklist
640.APPENDIX M  Level II Resource Checklist
640.APPENDIX N  Level II with Extended Neonatal Capabilities Resource Checklist
640.APPENDIX O  Level III Resource Checklist

AUTHORITY:  Implementing and authorized by the Developmental Disability Prevention Act
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[410 ILCS 250].

Section 640.10 Scope (Repealed)

The "Regionalized Perinatal Health Care Code" is designed to coordinate and facilitate the use of ongoing efforts and existing resources in Illinois to improve perinatal health and to prevent perinatal mortality and conditions leading to developmental disabilities.

(Source: Repealed at 34 Ill. Reg. ______, effective ____________)

Section 640.20 Definitions

"Act" means the Developmental Disability Prevention Act [410 ILCS 250].

"Active Candidate" means having completed a residency in the appropriate medical discipline in a program approved by the Residency Review Committee or a program approved by the Council on Postdoctoral Training (COPT) for the American Osteopathic Association (AOA). Active candidates shall become board certified within five years after completion of an approved program.

"Administrative Perinatal Center" means a university or university-affiliated hospital that is designated by the Department as a Level III hospital, which receives financial support from the Department to provide leadership and oversight of the Regionalized Perinatal Healthcare Program.

"Affiliated Hospital" means an institution that has a letter of agreement with a specific Administrative Perinatal Center.

"Apgar" means the score devised in 1952 by Virginia Apgar to assess the health of newborn children immediately after birth. The five criteria are Activity (Muscle Tone), Pulse, Grimace (Reflex Irritability), Appearance (Skin Color), and Respiration.
"Assisted Ventilation" means mechanical ventilation of any kind or Continuous Positive Airway Pressure (CPAP) of any kind.

"Bioethical or Infant Care Review Committee" means a hospital-based consultive group consisting of physicians and nonphysicians which can provide education, develop and recommend institutional policies, and offer consultation to providers and families facing a range of ethical problems or questions about the medical treatment of infants.

"Certified Local Health Department" means a local health department that receives program approval from the Department for all ten required basic health programs during required program and performance review.

"Congenital" means those intrauterine factors which influence the growth, development and function of the fetus. (Section 2(b) of the Act)

"Consultation" means a health care provider obtaining information from an obstetrician, a maternal-fetal medicine physician or neonatology specialist via the telephone, in writing, or in person for the purpose of making patient care decisions and developing a care plan.

"Continuous Quality Improvement" or "CQI" means a structured organizational process for involving personnel in planning and executing a continuous flow of improvements to provide quality health care that meets or exceeds expectations.

"Department" means the Department of Public Health. (Section 2(h) of the Act)

"Designated Local Health Agency" means an agency designated by the Department to provide maternal, infant, and family follow-up services to residents of a particular area. In areas served by a Certified Local Health Department, that department is the Designated Local Health Agency. For areas not served by a Certified Local Health Department, the designated Local Health Agency is a Certified Local Health Department for another county which has a contract with the Department to provide maternal, infant, and family follow-up services within the area or a county nurse or community nurse agency which has a contract with the Department to provide maternal, infant, and family follow-up services within the area.
"Designation" means official recognition of a hospital facility by the Director of the Department as having met the standards contained in Section 640.40 and Section 640.50 for the level of care that the hospital will provide as a part of a regional perinatal network for all levels of perinatal care.

"Developmental Disability" means mental retardation, cerebral palsy, epilepsy, or other neurological handicapping conditions of an individual found to be closely related to mental retardation or to require treatment similar to that required by mentally retarded individuals, and the disability originates before such individual attains age 18, and has continued, or can be expected to continue indefinitely, and constitutes a substantial handicap of such individuals. (Section 2(f) of the Act)

"Dietitian" means a person who is licensed as a dietitian in accordance with the Dietetic and Nutrition Services Practice Act [225 ILCS 30].

"Disability" means a condition characterized by temporary or permanent, partial or complete impairment of physical, mental or psychological function. (Section 2(g) of the Act)

"Environmental" means those extrauterine factors which influence the adaptation, well being or life of the newborn and may lead to disability. (Section 2(c) of the Act)

"Family Centered Care" means the services of the health team that foster parent-newborn-family relationships such as those described in American College of Obstetricians and Gynecologists, Family Center Maternity/Newborn Care in Hospitals, and American Academy of Pediatrics and American College of Obstetricians and Gynecologists, Guidelines for Perinatal Care.

"Full-time" means on duty a minimum of 36 hours, four days per week.

"Handicapping Condition" means a medically recognized birth defect that threatens life or has a potential for a developmental disability in accordance with Subpart C of the Illinois Health and Hazardous Substances Registry Code (77 Ill. Adm. Code 840.210).

"Health Care Provider" means an individual who provides medical services or treatments to patients within his or her scope of practice. This may include, but is
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not limited to, physician, nurse, dietitian, social worker and respiratory care provider.

"High-Risk" means an increased level of risk of harm or mortality to the woman of childbearing age, fetus or newborn from congenital and/or environmental factors. (Section 2(d) of the Act)

"High-Risk Infant" means a live-born infant fitting the Adverse Pregnancy Outcomes Reporting Systems (APORS) case definition. (See 77 Ill. Adm. Code 840.210.)

"High-Risk" means an increased level of risk of harm or mortality to the woman of childbearing age, fetus or newborn from congenital and/or environmental factors. (Section 2(d) of the Act)

"Hospital" means a facility defined as a hospital in Section 3 of the Hospital Licensing Act [210 ILCS 85].

"Intermediate Care Nursery" or "ICN" means a nursery that provides nursing care to those infants convalescing or those sick infants not requiring intensive care.

"Joint Morbidity and Mortality Review" means the required review of maternal and neonatal cases attended by the Administrative Perinatal Center's maternal-fetal medicine physician, neonatologist and the Perinatal Center administrator and/or obstetric and neonatal educators. The review is a quality improvement initiative under the Medical Studies Act [735 ILCS 5/8-2101] and consists of cases presented by the attending physician at the Regional Network Hospital. The review includes all maternal, fetal and neonatal deaths, as well as selected morbidities as determined by the Administrative Perinatal Center's Regional Quality Council or defined in the Regional Network Hospital's letter of agreement. The review provides evaluation and disposition of outcomes to guide educational program needs and quality improvement initiatives.

"Letter of Agreement" means a document executed between the Administrative Perinatal Center and the hospital, which includes responsibilities of each party in regard to the hospital's level of designation and the services to be provided.

"Maternity or Neonatal Complications" means those medically determined high-risk conditions, including, but not limited to, those explained in the Guidelines for Perinatal Care, American Academy of Pediatrics and American College of
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Obstetricians and Gynecologists.

"Maternity and Neonatal Service Plan" means the description required under Subpart O of the Hospital Licensing Requirements (77 Ill. Adm. Code 250) of the hospital's services for care of maternity and neonatal patients, and the way in which the services are part of an integrated system of perinatal care provided by designated perinatal facilities.

"Maternity or Neonatal Complications" means those medically determined high-risk conditions including but not limited to those explained in the Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians and Gynecologists.

"Morbidity" means an undesired result or complication associated with a pregnancy, whether naturally occurring or as the result of treatment rendered or omitted.

"Neonatal Intensive Care Unit" or "NICU" means an intensive care unit for high risk neonates, directed by a board-certified pediatrician with subspecialty certification in neonatal medicine.

"Neonate" means an infant less than 28 days of age.

"Nurse" means a registered nurse or a licensed practical nurse as defined in the Nurse Practice Act [225 ILCS 65].

"Nurse Midwife, Certified" or "Certified Nurse Midwife" or "CNM" means an individual educated in the two disciplines of nursing and midwifery who possesses evidence of certification according to the requirements of the American College of Nurse-Midwives (ACNM).

"Perinatal" means the period of time between the conception of an infant and the end of the first month of life. (Section 2(a) of the Act)

"Perinatal Advisory Committee" or "PAC" means the advisory and planning committee established by the Department, which is referred to in Section 3 of the Act.

"Perinatal Center" means a referral facility intended to care for the high-risk patient before, during or after labor and delivery and characterized by
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sophistication and availability of personnel, equipment, laboratory, transportation techniques, consultation and other support services. (Section 2(e) of the Act)

"Pharmacist, Registered" or "Registered Pharmacist" means a person who holds a certificate of registration as a registered pharmacist, a local registered pharmacist or a registered assistant pharmacist under the Pharmacy Practice Act of 1987 [225 ILCS 85].

"Physician" means any person licensed to practice medicine in all its branches as defined in the Medical Practice Act of 1987 [225 ILCS 60].

"Preventive Services" means a medical intervention provided to a high risk mother and/or neonate in an effort to reduce morbidity and mortality. "Reactions, Skills and Abilities for Developmental Screening (RSA)" is an objective observation guide used to conduct developmental screening in children.

"Regional Perinatal Management Group" means an organization of representatives of perinatal services, providers and service-related agencies and organizations within a regional perinatal network that is responsible for the planning, development, evaluation and operation of the network and the establishment of regional priorities and policies for system support activities and staff.

"Regional Perinatal Network" means any number and combination of hospital-based maternity and newborn facilities functioning at one of five or three levels of perinatal care.

"Regional Quality Council" or "RQC" means an organization of representatives of perinatal services, providers and service-related agencies and organizations within a regional perinatal network that is responsible for the planning, development, evaluation and operation of the network and the establishment of regional priorities and policies for system support activities and staff.

"Registered Nurse" means a person licensed as a registered professional nurse under the Nurse Practice Act.

"Respiratory Care Practitioner" means a person licensed as a respiratory care practitioner under the Respiratory Care Practice Act [225 ILCS 106].
"Social Worker" means a person who is a licensed social worker or a licensed clinical social worker under the Clinical Social Work and Social Work Practice Act [225 ILCS 20].

"Special Care Nursery" or "SCN" means a nursery that provides intermediate intensive care, directed by a board-certified pediatrician with subspecialty certification in neonatal medicine, to infants who weigh more than 1250 grams.

"State Perinatal Reporting System" means any system that requires data collection and submission of data to the Department. These systems include, but are not limited to, birth certificate submission, metabolic newborn screening, newborn hearing screening, perinatal HIV testing, and the Adverse Pregnancy Outcomes Reporting System (APORS) (see 77 Ill. Adm. Code 840).

"Statewide Quality Council" means the standing subcommittee established by the Perinatal Advisory Committee that is responsible for monitoring the quality of care and implementing recommendations for improving the quality of care being provided in the perinatal care system.

"Substantial Compliance" means meeting requirements, except for variance from the strict and literal performance that results in unimportant omissions or defects, given the particular circumstances involved.

"Substantial Failure" means the failure to meet requirements, other than unimportant omissions or defects, given the particular circumstances involved.

"Support Services" means the provision of current information regarding the identified handicapping conditions, referrals and counseling services, and the availability of additional consultative services.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.25 Incorporated and Referenced Materials

The following regulations, standards, and statutes and rules are incorporated or referenced in this Part.

a) State of Illinois Statutes:
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2) Freedom of Information Act [5 ILCS 140] (Ill. Rev. Stat. 1989, ch. 116, par. 201 et seq.). (See Section 640.90(e)(1) and (3)).


4) Hospital Licensing Act [210 ILCS 85] (Ill. Rev. Stat. 1989, ch. 111½, par. 142 et seq.). (See Section 640.90(e)(2)).

5) Section 8-2101 of the Code of Civil Procedure (Medical Studies Act) [735 ILCS 5/8-2101] (Ill. Rev. Stat. 1989, ch. 110, par. 8-2101). (See Section 640.90(b)(3), (e)(1) and (2)).

6) State Records Act [5 ILCS 160] (Ill. Rev. Stat. 1989, ch. 116, par. 43.4 et seq.). (See Section 640.90(e)(1)).

7) Illinois Health and Hazardous Substances Registry Act [410 ILCS 525]

8) Vital Records Act [410 ILCS 535]

9) Respiratory Care Practice Act [225 ILCS 106]

10) Dietetic and Nutrition Services Practice Act [225 ILCS 30]

11) Illinois Administrative Procedure Act [5 ILCS 100]

12) Nurse Practice Act [225 ILCS 65]

13) Pharmacy Practice Act of 1987 [225 ILCS 85]

14) Medical Practice Act of 1987 [225 ILCS 60]


b) State of Illinois RulesRegulations
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1) Department of Public Health – Illinois Health and Hazardous Substances Registry (77 Ill. Adm. Code 840). (See Sections 640.20, definition of "Handicapped Condition", 640.41 (c)(3), 640.90 (c)(1)).


3) Department of Public Health – Rules of Practice and Procedure for Administrative Hearings (77 Ill. Adm. Code 100). (See Section 640.45 (b)).

4) Department of Human Services – Maternal and Child Health Services Code (77 Ill. Adm. Code 630). (See Sections 640.80 (b)).

5) Department of Public Health – Freedom of Information Code (2 Ill. Adm. Code 1126). (See Section 640.90 (e)(3)).

c) Standards or Guidelines

1) Family Center Maternity/Newborn Care in Hospitals, American College of Obstetricians and Gynecologists (1978) (409 12th Street, SW, Washington, DC 20024). (See Sections 640.20, definition of "Family Centered Care")

2) Guidelines for Perinatal Care, American College of Obstetricians and Gynecologists (2007) (which may be obtained from the American Academy of Pediatrics, AAP, 141 Northwest Point Road, P.O. 927, Elk Grove Village, Illinois 60009-092760204). (See Sections 640.20, definition of "Family Centered Care," and "Maternity or Neonatal Complications", and (Section 640.43(d)(2);


d) All incorporations by reference of federal regulations and the standards of nationally recognized organizations refer to the regulations and standards on the date specified and do not include any amendments or editions or deletions subsequent to the date specified.
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(Source: Amended at 34 Ill. Reg. _____, effective _____________)

Section 640.30 Perinatal Advisory Committee

a) The Perinatal Advisory Committee (PAC) is an advisory body to the Department in matters pertaining to the regionalization of perinatal health care. The purpose is to advise the Department on the establishment and implementation of policy.

b) The duties of the PAC Perinatal Advisory Committee shall be to advise the Department on and make recommendations concerning:

1) Health policies and quality of care issues affecting perinatal health care services and implementation of the State's perinatal health care plan;

2) The needs of perinatal health care consumers and providers;

3) Methods to seek a better understanding and wider support of regionalized perinatal health care within the local community;

4) Coordinating and organizing regional networks or systems of perinatal health care;

5) Policies relating to planning, operating and maintaining regional networks or systems of perinatal health care;

6) All proposals for rulemaking affecting the provision of perinatal health care services under the Act; and

7) Hospitals seeking designation or redesignation as described in Sections 640.40 through 640.70.

c) The PAC Perinatal Advisory Committee shall consist of 22 members appointed by the Director of the Department and six ex-officio members as follows:

1) Members

A) Ten licensed physicians;
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B) Three hospital administrators;

C) Two registered nurses;

D) One licensed social worker;

E) One registered dietitian;

F) One registered respiratory care practitioner;

G) One health planner;

H) Two consumers or representatives of the general public interested in perinatal health care; and

I) One representative of a local health department;

2) Ex-Officio Members

A) One representative of the Illinois Department of Healthcare and Family Services; One representative of the Perinatal Association of Illinois;

B) One representative of the Illinois Department of Human Services; One representative of the Perinatal Centers of Illinois;

C) One representative of the Consortium of Perinatal Network Administrators;

D) One representative of the Chicago Department of Public Health;

E) One representative of the Chicago Maternal and Child Health Advisory Committee of the Chicago Department of Public Health; and

F) One representative of the Genetic and Metabolic Diseases Advisory Committee of the Department.

d) Physician membership on the PACPerinatal Advisory Committee shall consist of
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four obstetrician-gynecologists, to include a subspecialist in maternal/fetal medicine, four pediatricians, to include a subspecialist in neonatal/perinatal medicine, and two family practice physicians.

e) Recommendations for physicians shall be solicited from the Illinois State Medical Society, the Illinois Section of the American College of Obstetricians and Gynecologists, the Illinois Chapter of the American Academy of Pediatrics, and the Illinois Chapter of the American Academy of Family Practice. Recommendations for hospital administrators and a health planner shall be solicited from the Illinois Hospital Association. Recommendations for nurses shall be solicited from the Illinois Nurses Association, the Illinois Nurses Section of the American College of Obstetricians and Gynecologists, and the American College of Nurse-Midwives. Recommendations for a social worker, a dietitian and a respiratory care practitioner shall be solicited from the Illinois Perinatal Social Work Association, the Illinois Dietetics Association and the Illinois Society of Respiratory Care. Recommendations for a representative of a certified local health department shall be solicited from the Illinois Association of Public Health Administrators.

f) Membership of the PAC Perinatal Advisory Committee shall be selected to be representative of the levels of perinatal care described in Section 640.40, as well as of the different settings in which perinatal care is provided, both geographic and institutional.

g) Members of the Perinatal Advisory Committee shall serve four-year terms. Ex-officio members shall have no set term of service. Both members and ex-officio members shall have full voting privileges.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.40 Standards for Perinatal Care

a) Levels of Perinatal Care

Within each regional perinatal network there shall be three levels of perinatal care, and within Level II there shall be two categories of perinatal care: Level I or general care; Level II or intermediate care, or Level II with Extended Capabilities; and Level III or intensive care. Hospital licensing requirements for all five levels are described in Subpart O of the Hospital Licensing Requirements (77 Ill. Adm. Code 250). All hospitals
providing obstetrical and neonatal services shall be designated in accordance with the provisions of this Part and have a letter of agreement with a designated Administrative Perinatal Center. (Section 640.70 describes the minimum components for the letter of agreement.)

1) Non-Birthing Center hospitals do not provide perinatal services, but have a functioning emergency department. All licensed general hospitals that operate an emergency department shall have a letter of agreement with an Administrative Perinatal Center for referral of perinatal patients, regardless of whether the hospital provides maternity or newborn services. The letter of agreement shall delineate, but is not limited to, guidelines for transfer/transport of perinatal patients to an appropriate perinatal care hospital; telephone numbers for consultation and transfer/transport of perinatal patients; educational needs assessment for emergency department staff, and provision of education programs to maintain necessary perinatal skills.

2) Level I hospitals provide care to low-risk pregnant women and newborns, operate general care nurseries and do not operate an NICU or an SCN;

3) Level II hospitals provide care to women and newborns at moderate risk, operate intermediate care nurseries and do not operate an NICU or an SCN.

4) Level II with Extended Neonatal Capabilities hospitals provide care to women and newborns at moderate risk and do operate an SCN but do not operate an NICU.

5) Level III hospitals care for patients requiring increasingly complex care and do operate an NICU.

b) Perinatal Network

Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities and Level III hospitals shall function within the framework of a regionally integrated system of services, under the leadership of an Administrative Perinatal Center, designed to maximize outcomes and to promote appropriate use of expertise and resources. Prenatal Recognition of high risk conditions, prenatal consultations, referrals, or transfers and recognition of high risk conditions are important to improve outcomes. Regional consultant
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relationships in maternal-fetal medicine and neonatology referred to in this Part shall be detailed in the letter of agreement. The hospital shall ensure that staff physicians and consultants are familiar with and be cognizant of the standards and the guidelines in the letter of agreement.

c) All hospitals shall inform the Department of any change in or loss of essential resources required by this Part within 30 days after the change and/or loss. The hospital shall then replace the required resource within 60 days. Failure to comply shall result in a review by the Department, with a potential loss of designation.

c) Non-Maternity General Hospitals
All licensed general hospitals that may provide emergent or urgent care shall have a letter of agreement with a Perinatal Center for referral of perinatal patients, regardless of whether they provide maternity or newborn services. The letter of agreement shall delineate but not be limited to: guidelines for transfer/transport of perinatal patients to an appropriate perinatal care facility, telephone numbers for consultation and transfer/transport of perinatal patients, educational needs assessment for Emergency Room staff, and provision of education programs to maintain emergency perinatal skills.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.41 Level I – Standards for Perinatal Care

Level I: To be designated as Level I, a hospital facility shall apply to the Department as described in Section 640.60 of this Part; shall and comply with all the conditions described in Subpart O of the Hospital Licensing Requirements (77 Ill. Adm. Code 250) which are applicable to the level of care necessary for the patients served, and in addition shall comply with the following provisions (specifics regarding standards of care for both mothers and neonates as well as support services to be provided shall be defined in the hospital's letter of agreement with its Perinatal Center):

a) Level I – General Provisions

1) The Maternity and Neonatal Service Plan of the Level I facility shall include:

A) A letter of agreement between the hospital facility and its Administrative Perinatal Center establishing criteria for maternal
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and neonatal regarding plans for prompt consultation; criteria for maternal and neonatal transports; standards of care of mothers and neonates; and support services to be provided. (Section 640.70 establishes the minimum components for the letter of agreement.); with a maternal-fetal medicine subspecialist or neonatologist specific to high-risk women and those neonates with conditions or developmental disabilities requiring transfer, such as: acute surgical and cardiac difficulties, neonates born with handicapping conditions, managing high-risk pregnancies, genetic counseling, information, referral and counseling services for families of neonates born with a handicapping condition or for a high-risk mother or her spouse, and

B) Continuing education of staff in perinatal care; and, including family-centered care for neonates with handicapping conditions.

C) Participation in the CQI program implemented by the Administrative Perinatal Center. (Section 640.70 describes the minimum components for the letter of agreement.) This agreement must include participation in a Continuous Quality Improvement program as defined by the Department and as designed and implemented by the Perinatal Center.

2) The critical considerations in the care of patients anticipating delivery in these hospitals are as follows:

A) The earliest possible detection of the high-risk pregnancy (risk assessment); and consultation with a maternal-fetal medicine subspecialist or neonatologist as specified in the letter of agreement; and transfer to the appropriate level of care; and

B) The availability of trained personnel and facilities to provide competent emergency obstetric and newborn care. Included in the functions of this hospital facility are the stabilization of patients with unexpected problems, initiation of neonatal and maternal transports, patient and community education, and data collection and evaluation.
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3) The Level I hospital shall provide continuing education for medical, nursing, respiratory therapy, and other staff providing general perinatal services, with evidence of a yearly competence assessment appropriate to the patient population served.

4) The Level I hospital shall maintain a system of recording patient admissions, discharges, birth weight, outcome, complications, and transports to support network quality improvement activities described in the hospital's letter of agreement with the Administrative Perinatal Centers as developed by the Statewide Quality Council and must be consistent with that of the Perinatal Center. The hospital shall comply with the reporting requirements of the State Perinatal Reporting System/Adverse Pregnancy Outcomes Reporting System (77 Ill. Adm. Code 840).

b) Level I – Standards for Maternal Care

1) The maternal patient with an uncomplicated current pregnancy and no previous history suggestive of potential difficulties is considered appropriate for Level I hospitals; however, the hospital's letter of agreement shall establish the specific conditions for the Level I hospital facilities.

2) Other than those maternal patients identified in subsection (b)(1), pregnancies of fewer than 36 weeks gestation constitute potentially high-risk conditions for which the attending health care provider shall consult with a board-certified obstetrician or maternal-fetal medicine subspecialist to determine whether a transport or transfer to a higher level of care is needed. The letter of agreement shall specify policies for consultation and the hospital's obstetric policies and procedures for each of, but not limited to, the pregnancy conditions listed in Appendix B and Appendix C of Guidelines for Perinatal Care. All maternal patients other than those identified in subsection (b)(1) above constitute potentially high-risk conditions for which consultation with a maternal-fetal medicine subspecialist or neonatologist as specified in the letter of agreement is recommended. Consultation or transfer shall be considered for each of the following conditions:
A) Previous Pregnancy Problems:
   i) Premature infant
   ii) Perinatal death or mental retardation
   iii) Isoimmunization
   iv) Difficult deliveries
   v) Congenital malformations
   vi) Mid-trimester loss

B) Current Pregnancy Problems:
   i) Any medical disorder (e.g., diabetes mellitus, hemoglobinopathy, chronic hypertension, heart disease, renal disease)
   ii) Drug addiction
   iii) Multiple gestation
   iv) Intrauterine growth restriction
   v) Preterm labor less than or equal to 36 weeks
   vi) Postdate greater than or equal to 42 weeks
   vii) Third trimester bleeding
   viii) Abnormal genetic evaluation
   ix) Pregnancy-induced hypertension

3) Hospitals shall have the capability for continuous electronic maternal-fetal monitoring for patients identified at risk, with staff available 24 hours a day, including physician and nursing, who are knowledgeable of
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electronic fetal monitoring use and interpretation. Physicians and nurses shall complete a competence assessment in electronic maternal-fetal monitoring every two years.

4) Hospitals shall have the capability of performing caesarean sections within 30 minutes after deciding to make an incision.

c) Level I – Standards for Neonatal Care

1) Neonatal The neonatal patients greater than 36 weeks gestation or greater than 2500 grams without risk factors and infants with physiologic jaundice are generally considered appropriate for Level I hospitals facilities; however, the hospitals facilities' letter of agreement shall establish the specific conditions for Level I hospitals facilities.

2) For all neonatal patients other than those identified in subsection (c)(1), consultation with a neonatologist is required to determine whether a transport to a higher level of care is needed. Consultation shall be specified in the letter of agreement and outlined in the hospital's pediatric policies and procedures for conditions including, but not limited to: All neonatal patients other than those identified in subsection (c)(1) above constitute neonatal conditions for which a neonatology consultation as specified in the letter of agreement by the attending physician is recommended. Consultation or transfer is recommended for each of the following conditions:

A) Gestational age less than 36 weeks, birth weight less than 2500 grams

A) Small-for-gestational age (less than 10th percentile)

B) Documented sepsis

B) Seizures

C) Congenital heart disease

E) Multiple congenital anomalies
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F) Apnea

G) Respiratory distress

H) Neonatal asphyxia

I) Handicapping Infants identified as having handicapping conditions or developmental disabilities that threaten life or subsequent development

J) Severe anemia

K) Hyperbilirubinemia, not due to physiologic cause

L) Polycythemia

Specifics regarding consultation or transfer for each of these conditions must be detailed in the letter of agreement.

d) Level I – Resource Requirements

The following support services shall be available:

1) Capability for continuous electronic maternal-fetal monitoring for patients identified at risk with staff knowledgeable in its use and interpretation available with evidence of completion of a yearly competence assessment in electronic fetal monitoring.

1) Blood bank technicians shall be on call and available within 30 minutes for performance of routine blood banking procedures.

2) General anesthesia services shall be on call and available within 30 minutes to initiate caesarean sections.

4) Caesarean section capability within 30 minutes.

3) Radiology services shall be available within 30 minutes notice.

4) Clinical laboratory services shall include microtechnique for hematocrit
within 15 minutes; glucose, blood urea nitrogen (BUN), creatinine, blood gases, and routine urinalysis in one hour; complete blood count (CBC), routine blood chemistries, type, cross, Coombs' test, and bacterial smear within one hour; and capability for bacterial culture and sensitivity and viral culture.

5) A physician for the program shall be designated to assume primary responsibility for initiating, supervising and reviewing the plan for management of distressed infants in the delivery room. Policies and procedures shall assign responsibility for identification and resuscitation of distressed neonates to individuals who have completed a neonatal resuscitation program and are both specifically trained and immediately available in the hospital at all times, such as another physician, a nurse with training and experience in neonatal resuscitation, or a licensed respiratory care practitioner. Individuals assigned to perform neonatal resuscitation shall have documented evidence of current completion of a neonatal resuscitation course. It is further recommended that physicians and/or advanced practice nurses who care for newborns have documented evidence of completion of a neonatal resuscitation course.

8) The Level I facility shall be responsible for provision of continuing education for medical, nursing, respiratory therapy, and other staff providing general perinatal services with evidence of a yearly competence assessment appropriate to the patient population served.

e) Application for Designation, Redesignation or Change in Network

1) To be designated or to retain designation, a hospital shall submit the required application documents to the Department. For information needed to complete any of the processes, see Section 640.50 (Designation and Redesignation of Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities, Level III Perinatal Hospitals, and Administrative Perinatal Centers) and Section 640.60 (Application for Hospital Designation and Redesignation as Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities, Level III Perinatal Hospital, and Administrative Perinatal Center, and Assurances Required of Applicants).
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2) The following information shall be submitted to the Department to facilitate the review of the hospital's application for designation or redesignation:

A) Appendix A (fully completed);

B) Resource Checklist (fully completed);

C) A proposed letter of agreement between the hospital and the Administrative Perinatal Center (unsigned);

D) The curriculum vitae for all directors of patient care, i.e., obstetrics, neonatal, ancillary medical and nursing.

3) When the information described in subsection (e)(2) is submitted, the Department will review the material for compliance with this Part. This documentation will be the basis for a recommendation for approval or disapproval of the applicant hospital's application for designation.

4) The medical co-directors of the Administrative Perinatal Center (or their designees), the medical directors of obstetrics and maternal and newborn care, and a representative of hospital administration from the applicant hospital shall be present during the PAC's review of the application for designation.

5) The Department will make the final decision and inform the hospital of the official determination regarding designation. The Department's decision will be based upon the recommendation of the PAC and the hospital's compliance with this Part, and may be appealed in accordance with Section 640.45. The Department will consider the following criteria to determine if a hospital is in compliance with this Part:

A) Maternity and Neonatal Service Plan (Subpart O of the Hospital Licensing Requirements);

B) Proposed letter of agreement between the applicant hospital and its Administrative Perinatal Center in accordance with Section 640.70;
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C) Appropriate outcome information contained in Appendix A and the Resource Checklist (Appendices L, M, N and O);

D) Other documentation that substantiates a hospital's compliance with particular provisions or standards of perinatal care; and

E) Recommendation of Department program staff.

e) Exceptions to Level I Standards of Care

1) Exceptions to the standards of care set forth in this Part may be necessary based on patient care needs, current practice, outcomes, and geography in the regional perinatal network. These exceptions are not intended to circumvent the Level II designation. The applicant facility or the Perinatal Center may seek the advice and consultation of the Department as well as the Perinatal Advisory Committee in regard to the conditions necessary for an exception.

2) Exceptions to the standards of care of this Part may be granted when the facility requesting an exception demonstrates that the resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Level II facility. The resource requirements for these exceptions may be found in Section 640.42(d) for Level II facilities. The proposed exceptions shall be determined by the applicant facility and its Perinatal Center based primarily on outcomes.

3) If the applicant facility and its Perinatal Center cannot reach agreement on any aspect of the exceptions to the standards of care of this Part, the applicant facility or Perinatal Center shall seek the advice and consultation of the Perinatal Advisory Committee (i.e., subcommittee on facility designation). Any exception to the standards of care of this Part shall be clearly defined in the proposed letter of agreement and approved by the Department before implementing the exceptions or patient care services being requested. The Department shall permit a period of testing or trial (probation) to demonstrate that the applicant facility's resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Level II facility.

4) If a dispute between the applicant facility and its Perinatal Center cannot
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be resolved after consultation with the Perinatal Advisory Committee (i.e., subcommittee on facility designation), then the applicant facility, the Perinatal Center, or the Perinatal Advisory Committee shall submit the dispute to the Department for settlement. The Department shall review all of the relevant information and documentation that clearly substantiates the facility's compliance with particular provisions or standards of perinatal care and the recommendations of the Perinatal Advisory Committee in deciding or settling a dispute. The Department shall inform the applicant facility, the Perinatal Center and the Perinatal Advisory Committee of its decision or judgment.

5) The following information shall be submitted to the Perinatal Advisory Committee (i.e., subcommittee on facility designation) to facilitate the review of the applicant facility's application for designation with exceptions to the standards of care of this Part:

A) A proposed letter of agreement (unsigned).

B) The curriculum vitae for all directors of patient care, i.e., OB, neonatal, nursing (OB and neonatal).

C) Appendices A and B (fully completed).

D) A letter from the Perinatal Center that includes the following information:

i) List of the exceptions being requested.

ii) Sufficient data/information to demonstrate that the quality of care (outcomes) of the applicant facility are substantially equivalent to the appropriate standards as outlined in subsection (c) of this Section.

iii) A description of the monitoring system used when a consultation occurs between the attending physician at the referring hospital and the physician consultant at the Perinatal Center or Level III facility and it is determined that the mother or newborn infant should stay in the community hospital for care.
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iv) A description of any arrangements made between the applicant facility and the Perinatal Center to seek or insure quality improvement.

6) When the information described in Section 640.41(e) is submitted to the Perinatal Advisory Committee, it shall review the material for compliance with the Regionalized Perinatal Health Care Code, and shall make a recommendation for approval or disapproval of the applicant facility's application for designation with exceptions to the Department.

7) The medical co-directors of the Perinatal Center (or their designees) and the medical directors of obstetrics and maternal and newborn care and a representative of hospital administration from the applicant facility shall be present during the Perinatal Advisory Committee's review of the applicant facility's application for designation with exceptions.

8) The Department shall review the submitted materials and any other documentation that clearly substantiates the facility's compliance with particular provisions or standards of perinatal care, including quality of care (outcomes) data/information and the recommendation of the Perinatal Advisory Committee, and shall make a recommendation to the Director of Public Health concerning the approval or disapproval of the applicant facility's application for designation with exceptions.

9) The Director of Public Health shall make the final decision and inform the facility of the official determination regarding designation with exceptions to the standards of care of this Part. The Director's decision shall be based upon the recommendation of the Perinatal Advisory Committee and the facility's compliance with the Regionalized Perinatal Health Care Code, and may be appealed in accordance with Section 640.45. The Director of Public Health shall consider the following criteria or standards to determine if a facility is in compliance with the Code:

A) Maternity and Neonatal Service Plan (Subpart O of the Illinois Hospital Licensing Requirements).

B) Proposed letter of agreement between the applicant facility and its Perinatal Center in accordance with the provisions described in
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Section 640.70.

C) Appropriate outcome information contained in Appendices A and B.

D) Other documentation that clearly substantiates a facility's compliance with particular provisions or standards of perinatal care.

E) Recommendation of Department program staff.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.42 Level II and Level II with Extended Neonatal Capabilities – Standards for Perinatal Care

Level II: To be designated as Level II or Level II with Extended Neonatal Capabilities, a hospital facility shall apply to the Department as described in Section 640.60 of this Part; shall and comply with all of the conditions described in Subpart O of the Hospital Licensing Requirements that(77 Ill. Adm. Code 250) promulgated by the Department which are applicable to the level of care necessary for the patients served; and in addition shall comply with the following provisions (specifics regarding standards of care for both mothers and neonates as well as resource requirements to be provided shall be defined in the hospital's letter of agreement with its Administrative Perinatal Center):

a) Level II and Level II with Extended Neonatal Capabilities – General Provisions

1) A Level II or Level II with Extended Neonatal Capabilities hospital shall:

   1) Provide all services outlined for Level I (Section 640.41(a));

   2) Provide diagnosis and treatment of selected high-risk pregnancies and neonatal problems; – Both the obstetrical service and the neonatal service must achieve the applicable capability of a Level II or Level II with Extended Capabilities facility for the applicable Level II designation. Further standards for Level II facilities are set out in subsections (b) through (h) with subsections (f) through (h) specifically applying to facilities that are Level II with Extended Capabilities.
Included in the functions of this facility are education of allied health professionals and

3) Accept acceptance of selected maternal-fetal and neonatal transports from Level I or other Level II hospitals as identified in the letters of agreement with the Administrative Perinatal Center; and—The letters of agreement should include participation in a Continuous Quality Improvement program as defined by the Department and implemented by the Perinatal Center.

4.2) Maintain a system for recording patient admissions, discharges, birth weight, outcome, complications, and transports must be maintained and must meet requirements to support network activities described in the hospital's letter of agreement with the Administrative Perinatal Center. The hospital shall comply with the reporting requirements of the State Perinatal Reporting System as developed by the Statewide Quality Council. The hospital must comply with the requirements of the Adverse Pregnancy Outcomes Reporting System (77 Ill. Adm. Code 840). For hospitals designated Level II with Extended Capabilities, participation in the Perinatal Reporting System is also required.

b) Level II – Standards for Maternal Care

1) The following maternal patients are considered to be appropriate for management and delivery by the primary physician at Level II hospitals without requirement for a maternal-fetal medicine consultation; however, the hospital's letter of agreement shall establish the specific conditions for the Level II hospital:

A) Those listed for Level I (See Section 640.41(b)(4));

B) Normal current pregnancy although obstetric history may suggest potential difficulties;

C) Selected medical conditions controlled with medical treatment such as mild chronic hypertension, thyroid disease, illicit drug use, urinary tract infection, and non-systemic steroid-dependent reactive airway disease;
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D) Selected obstetric complications that present after 32 weeks gestation, such as mild pre-eclampsia/pregnancy-induced hypertension, placenta previa, abrupto placenta, premature rupture of membranes or premature labor;

E) Other selected obstetric conditions that do not adversely affect maternal health or fetal well-being, such as normal twin gestation, hyperemesis gravidium, suspected fetal macrosomia, or incompetent cervical os;

F) Gestational diabetes, Class A1 (White's criteria).

2) The attending health care provider shall consult for the following maternal conditions, consultation with a maternal-fetal medicine subspecialist, as detailed in the letter of agreement and outlined in the hospital’s obstetric department policies and procedures, for each of, but not limited to, the current pregnancy conditions listed in Appendix B and Appendix C of Guidelines for Perinatal Care, with subsequent management and delivery at the appropriate facility as determined by mutual collaboration is recommended:

A) Current obstetric history suggestive of potential difficulties such as: intrauterine growth restriction, prior neonatal death, two or more previous preterm deliveries less than 34 weeks, a single previous preterm delivery less than 30 weeks, birth of a neonate with serious complications resulting in a handicapping condition, recurrent spontaneous abortion or fetal demise, family history of genetic disease;

B) Active chronic medical problems with known increase in perinatal mortality, such as: cardiovascular disease Class I and Class II, autoimmune disease, reactive airway disease requiring treatment with systemic corticosteroids, seizure disorder, controlled hyperthyroidism on replacement therapy, hypertension controlled on a single medication, idiopathic thrombocytopenia purpura, thromboembolic disease, malignant disease (especially when active), renal disease with functional impairment, human immunodeficiency viral infection (consultation may be with
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maternal-fetal medicine or infectious disease subspecialist);

C) Selected obstetric complications that present prior to 34 weeks gestation, such as: suspected intrauterine growth restriction, polyhydramnios, oligohydramnios, pre-eclampsia/pregnancy-induced hypertension, congenital viral disease, maternal surgical conditions, suspected fetal abnormality or anomaly, isoimmunization with antibody titers greater than 1:8, antiphospholipid syndrome;

D) Abnormalities of the reproductive tract known to be associated with an increase in preterm delivery, such as uterine anomalies or diethylstilbestrol exposure;

E) Insulin dependent diabetes Class A2 and B or greater (White's criteria).

3) The attending health care provider shall refer patients for the following maternal conditions, referral to a maternal-fetal medicine subspecialist for evaluation based on the pregnancy conditions listed in Appendix B and Appendix C of Guidelines for Perinatal Care shall occur. Subsequent patient management and site of delivery shall be determined by mutual collaboration between the patient’s physician and the maternal-fetal medicine subspecialist as outlined in the letter of agreement with the Administrative Perinatal Center:

A) Selected chronic medical conditions with a known increase in perinatal mortality, such as: cardiovascular disease with functional impairment (Class III or greater), respiratory failure requiring mechanical ventilation, acute coagulopathy, intractable seizures, coma, sepsis, solid organ transplantation, active autoimmune disease requiring corticosteroid treatment, unstable reactive airway disease, renal disease requiring dialysis or with a serum creatinine concentration greater than 1.5 mg%, active hyperthyroidism, hypertension that is unstable or requires more than one medication to control, severe hemoglobinopathy;

B) Selected obstetric complications that present prior to 32 weeks gestation (prior to 30 weeks gestation for Level II with extended
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...capacities), such as: multiple gestation with more than two fetuses, twin gestation complicated by demise, discordancy, or maldevelopment of one fetus or by fetal-fetal transfusion, premature labor unresponsive to first-line tocolytics, premature rupture of membranes, medical and obstetrical complications of pregnancy possibly requiring induction of labor or non-emergent cesarean section for maternal or fetal indications, such as severe pre-eclampsia:

C) Isoimmunization with possible need for intrauterine transfusion;

D) Insulin-dependent diabetes mellitus Classes C, D, R, F, or H (White's criteria);

E) Suspected congenital anomaly or abnormality requiring an invasive fetal procedure, neonatal surgery or postnatal medical intervention to preserve life, such as: fetal hydrops, pleural effusion, ascites, persistent fetal arrhythmia, major organ system malformation-malfunction, or genetic condition.

4) Hospitals shall have the capability for continuous electronic maternal-fetal monitoring for patients identified at risk, with staff available 24 hours a day, including physician and nursing, who are knowledgeable of electronic maternal-fetal monitoring use and interpretation. Physicians and nurses shall complete a competence assessment in electronic maternal-fetal monitoring every two years.

c) Level II – Standards for Neonatal Care

1) The following neonatal patients are considered appropriate for Level II hospitals/facilities without a requirement for neonatology consultation:

A) Those listed for Level I (see Section 640.41(c)(b)(4)(i));

B) Premature infants at 32 or more weeks gestation who are otherwise well;

C) Infants with mild to moderate respiratory distress (not requiring assisted mechanical ventilation in excess of six hours).
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D) Infants with suspected neonatal sepsis, hypoglycemia responsive to glucose infusion, and asymptomatic neonates of diabetic mothers; and

E) Infants with a birth weight greater than 1500 grams who are otherwise well.

E) Nursery care of premature infants at 32 or more weeks gestation who are otherwise well.

2) The attending physician shall consult a neonatologist for the following neonatal conditions. Consultation shall be specified in neonatology consultation is recommended, as detailed in the letter of agreement with the Administrative Perinatal Center and outlined in the hospital's pediatric department policies and procedures for conditions including, but not limited to, for each of the following:

A) Premature birth with gestation less than 32 weeks, but greater than or equal to 30 weeks;

A) Birth infants with a birth weight less than 1500 grams, but greater than 1250 grams;

B) Infants with 10 minute Apgar scores of 5 or less;

C) Handicapping infants identified as having handicapping conditions or developmental disabilities that threaten subsequent development in an otherwise stable infant.

3) Minimum conditions for transport shall be specified in the letter of agreement and outlined in the hospital's pediatric department policies and procedures for conditions including, but not limited to: Transfer shall occur upon recommendation of the Perinatal Center for each of the following neonatal conditions:

A) Premature birth that is less than 32 weeks gestation;

B) Birth weight less than or equal to 1500 grams;
C) Assisted Infants requiring mechanical ventilation beyond the initial stabilization period of six hours;

D) Infants who require a sustained inhaled oxygen concentration in excess of 50% in order to maintain a transcutaneous or arterial oxygen saturation greater than or equal to 92%;

D)E) Congenital Infants with significant congenital heart disease associated with cyanosis, congestive heart failure, or impaired peripheral blood flow;

E)F) Major congenital Infants with major congenital malformations requiring immediate comprehensive evaluation or neonatal surgery;

F)G) Neonatal Infants requiring neonatal surgery required with general anesthesia;

G)H) Sepsis Infants with sepsis, unresponsive to therapy, associated with persistent shock or other organ system failure;

H)I) Uncontrolled Infants with uncontrolled seizures;

I)J) Stupor Infants with stupor, coma, hypoxic ischemic encephalopathy Stage II or greater;

J)K) Double-volume Infants requiring double-volume exchange transfusion;

K)L) Metabolic Infants with metabolic derangement persisting after initial correction therapy;

L)M) Handicapping Infants identified as having handicapping conditions that threaten life for which transfer can improve outcome.

d) Level II – Resource Requirements
Resources shall include all those listed for Level I (Section 640.41(d)) as well as the following:
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1) Experienced blood bank technicians shall be immediately available in the hospital for blood banking procedures and identification of irregular antibodies. Blood component therapy shall be readily available.

2) Experienced radiology technicians shall be immediately available in the hospital with professional interpretation available 24 hours a day. Ultrasound capability shall be available 24 hours a day. In addition, Level I ultrasound and staff knowledgeable in its use and interpretation shall be available 24 hours a day.

3) Clinical laboratory services shall include microtechnique blood gases in 15 minutes, and electrolytes and coagulation studies within one hour.

4) Personnel skilled in phlebotomy and intravenous (IV) placement in the newborn shall be available 24 hours a day.

5) Social work services provided by one licensed medical social worker, preferably with relevant experience and responsibility for perinatal patients, shall be available through the hospital social work department.

6) Protocols for discharge planning, routine follow-up care, and developmental follow-up shall be established.

7) General anesthesia on call available within 30 minutes to initiate caesarean section.

8) A licensed respiratory care practitioner with experience in neonatal care shall be available.

9) Capability to provide neonatal resuscitation in the delivery room shall be satisfied by current completion of a neonatal resuscitation program by medical, nursing and respiratory care staff or a hospital rapid response team. Continuous electronic maternal-fetal monitoring and staff knowledgeable in its use and interpretation, with evidence of completion of a yearly competence assessment in electronic fetal monitoring, shall be
available 24 hours a day.

10) The Level II facility shall be responsible for provision of continuing education for medical, nursing, respiratory therapy and other staff providing general perinatal services with evidence of a yearly competence assessment appropriate to the patient population served.

11) A physician for the program shall be designated to assume primary responsibility for initiating, supervising and reviewing the plan for management of depressed infants in the delivery room. Policies and procedures shall assign responsibility for identification and resuscitation of distressed neonates to an individual who is both specifically trained and available in the hospital at all times, such as another physician, a nurse with training and experience in perinatal care, or respiratory therapist. Individuals assigned to perform neonatal resuscitation shall have documented evidence of current completion of a neonatal resuscitation course. It is further recommended that physicians and/or advanced practice nurses who care for newborns have documented evidence of a neonatal resuscitation course.

e) Application for Designation, Redesignation or Change in Network

1) To be designated or to retain designation, a hospital shall submit the required application documents to the Department. For information needed to complete any of the processes, see Section 640.50 and Section 640.60.

2) The following information shall be submitted to the Department to facilitate the review of the hospital's application for designation or redesignation:

A) Appendix A (fully completed);

B) Resource Checklist (fully completed) (Appendices L, M, N and O);

C) A proposed letter of agreement between the hospital and the Administrative Perinatal Center (unsigned); and
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D) The curriculum vitae for all directors of patient care, i.e., obstetrics, neonatal, ancillary medical care and nursing (both obstetrics and neonatal).

3) When the information described in subsection (e)(2) is submitted, the Department will review the material for compliance with this Part. This documentation will be the basis for a recommendation for approval or disapproval of the applicant hospital's application for designation.

4) The medical co-directors of the Administrative Perinatal Center (or their designees), the medical directors of obstetrics and maternal and newborn care, and a representative of hospital administration from the applicant hospital shall be present during the PAC's review of the application for designation.

5) The Department will make the final decision and inform the hospital of the official determination regarding designation. The Department's decision will be based upon the recommendation of the PAC and the hospital's compliance with this Part and may be appealed in accordance with Section 640.45. The Department will consider the following criteria or standards to determine if a hospital is in compliance with this Part:

A) Maternity and Neonatal Service Plan (Subpart O of the Hospital Licensing Requirements);

B) Proposed letter of agreement between the applicant hospital and its Administrative Perinatal Center, in accordance with Section 640.70;

C) Appropriate outcome information contained in Appendix A and the Resource Checklist;

D) Other documentation that substantiates a hospital's compliance with particular provisions or standards of perinatal care set forth in this Part; and

E) Recommendation of Department program staff.

e) Exceptions to Level II—Standards of Care
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1) Exceptions to the standards of care set forth in this Part may be necessary based on patient care needs, current practice, outcomes, and geography in the regional perinatal network. These exceptions are not intended to circumvent the Level II with Extended Capabilities designation. The applicant facility or the Perinatal Center may seek the advice and consultation of the Department as well as the Perinatal Advisory Committee in regard to the conditions necessary for an exception.

2) Exceptions to the standards of care of this Part may be granted when the facility requesting an exception demonstrates that the resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Level II facility with Extended Capabilities. The resource requirements for these exceptions may be found in subsection (d) of this Section for Level II with Extended Capabilities standards. The proposed exceptions shall be determined by the applicant facility and its Perinatal Center based primarily on outcomes.

3) If the applicant facility and its Perinatal Center cannot reach agreement on any aspect of the exceptions to the standards of care of this Part, the applicant facility or Perinatal Center shall seek the advice and consultation of the Perinatal Advisory Committee (i.e., subcommittee on facility designation). Any exception to the standards of care of this Part shall be clearly defined in the proposed letter of agreement and approved by the Department before implementing the exceptions or patient care services being requested. The Department shall permit a period of testing or trial (probation) to demonstrate that the applicant facility's resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Level II with Extended Capabilities facility.

4) If a dispute between the applicant facility and its Perinatal Center cannot be resolved after consultation with the Perinatal Advisory Committee (i.e., subcommittee on facility designation), then the applicant facility, the Perinatal Center or the Perinatal Advisory Committee shall submit the dispute to the Department for settlement. The Department shall review all of the relevant information and documentation that clearly substantiates the facility's compliance with particular provisions or standards of perinatal care and the recommendations of the Perinatal Advisory Committee in deciding or settling a dispute. The Department shall inform
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the applicant facility, the Perinatal Center and the Perinatal Advisory Committee of its decision or judgment.

5) The following information shall be submitted to the Perinatal Advisory Committee (i.e., subcommittee on facility designation) to facilitate the review of the applicant facility’s application for designation with exceptions to the standards of care of this Part:

A) A proposed letter of agreement (unsigned).

B) The curriculum vitae for all directors of patient care, i.e., OB, neonatal, nursing (OB and neonatal).

C) Appendices A and B (fully completed).

D) A letter from the Perinatal Center that includes the following information:

i) List of the exceptions being requested.

ii) Sufficient data/information to demonstrate that the quality of care (outcomes) of the applicant facility are substantially equivalent to the appropriate standards as outlined in subsection (c) of this Section.

iii) A description of the monitoring system used when a consultation occurs between the attending physician at the referring hospital and the physician consultant at the Perinatal Center or Level III facility and it is determined that the mother or newborn infant should stay in the community hospital for care.

iv) A description of any arrangements made between the applicant facility and the Perinatal Center to seek or insure quality improvement.

6) When the information described in subsection (e) is submitted to the Perinatal Advisory Committee, it shall review the material for compliance with the Regionalized Perinatal Health Care Code, and shall make a
recommendation for approval or disapproval of the applicant facility's application for designation with exceptions to the Department.

7) The medical co-directors of the Perinatal Center (or their designees) and the medical directors of OB and neonatology and a representative of hospital administration from the applicant facility shall be present during the Perinatal Advisory Committee's review of the applicant facility's application for designation with exceptions.

8) The Department shall review the submitted materials and any other documentation that clearly substantiates the facility's compliance with particular provisions or standards of perinatal care, including quality of care (outcomes) information and the recommendation of the Perinatal Advisory Committee, and shall make a recommendation to the Director of Public Health concerning the approval or disapproval of the applicant facility's application for designation with exceptions.

9) The Director of Public Health shall make the final decision and inform the facility of the official determination regarding designation with exceptions to the standards of care of this Part. The Director's decision shall be based upon the recommendation of the Perinatal Advisory Committee and the facility's compliance with the Regionalized Perinatal Health Care Code, and may be appealed in accordance with Section 640.45. The Director of Public Health shall consider the following criteria or standards to determine if a facility is in compliance with the Code:

A) Maternity and Neonatal Service Plan (Subpart O of the Illinois Hospital Licensing Requirements).

B) Proposed letter of agreement between the applicant facility and its Perinatal Center in accordance with the provisions described in Section 640.70.

C) Appropriate outcome information contained in Appendices A and B.

D) Other documentation that clearly substantiates a facility's compliance with particular provisions or standards of perinatal care.
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E) Recommendation of Department program staff.

f) Level II with Extended Neonatal Capabilities – Standards for Special Care Nursery Neonatal Intensive Care Services

1) The following patients are considered appropriate for Level II with Extended Neonatal Capabilities hospitals with SCN neonatal intensive care services:

A) Those listed in subsection (c) of this Section for Level II care;

B) Infants with nursery care of low birth weight infants greater than 1250 grams;

C) Premature nursery care of premature infants of 30 or more weeks gestation;

D) Infants on assisted mechanical ventilation.

2) For each of the following neonatal conditions, a consultation shall occur between the Level II with Extended Neonatal Capabilities attending physician and the Administrative Perinatal Center or Level III neonatologist is required. It is expected that the attending neonatologist at the Level II with Extended Neonatal Capabilities hospital facility and the attending neonatologist at the Administrative Perinatal Center or Level III hospital facility shall determine, by mutual collaboration, the most appropriate hospital facility to continue patient care by mutual collaboration. The Level II hospital facility with Extended Neonatal Capabilities shall develop a prospective plan for patient care for those infants who remain at the Level II hospital facility with Extended Capabilities. The plan shall include the following criteria that would trigger subsequent transfer to a Perinatal Center or Conditions that require transport to a Level III hospital shall be specified in the letter of agreement with the Administrative Perinatal Center and outlined in the hospital's department of pediatrics policies and procedures, including, but not limited to:

A) Premature birth that is less than 30 weeks gestation;
B) Birth weight less than or equal to 1250 grams;

C) All conditions listed in subsection (c)(3) of this Section. Infants with significant congenital heart disease associated with cyanosis, congestive heart failure, or impaired peripheral blood flow;

D) Infants with major congenital malformations requiring immediate comprehensive evaluation or neonatal surgery;

E) Infants requiring neonatal surgery with general anesthesia;

F) Infants with sepsis, unresponsive to therapy, associated with persistent shock or other organ system failure;

G) Infants with uncontrolled seizures;

H) Infants with stupor, coma, hypoxic ischemic encephalopathy Stage II or greater;

I) Infants requiring double-volume exchange transfusion;

J) Infants with metabolic derangement persisting after initial correction therapy;

K) Infants identified as having handicapping conditions that threaten life for which transfer can improve outcome.

g) Level II with Extended Neonatal Capabilities – Resource Requirements

1) Resources shall include all those listed in Section 640.41(d) for Level I care and in Section 640.42(d) for Level II care, as well as the following:

A) Obstetric activities shall be directed and supervised by a full-time board-certified obstetrician or a subspecialty obstetrician certified by the American Board of Obstetrics and Gynecology in the subspecialty of maternal and fetal medicine or a licensed osteopathic physician with equivalent training and experience and certification certified by the American Osteopathic Board of
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Obstetricians and Gynecologists.

B) Neonatal activities shall be directed and supervised by a full-time pediatrician certified by the American Board of Pediatrics Sub-Board of Neonatal/Perinatal Medicine or a licensed osteopathic physician with equivalent training and experience and certification by the American Osteopathic Board of Pediatricians.

C) The directors of obstetric and neonatal services shall ensure the back-up supervision of their services when they are unavailable.

D) The obstetric-newborn nursing services shall be directed by a full-time nurse experienced in perinatal nursing, preferably with a master's degree.

E) The pediatric-neonatal respiratory therapy services shall be directed by a full-time licensed respiratory care practitioner with at least three years experience in all aspects of pediatric and neonatal respiratory therapy, preferably with a bachelor's degree and one successful completion of the neonatal/pediatric specialty examination of the National Board for Respiratory Care.

F) Preventive services shall be designated to prevent, detect, diagnose and refer or treat conditions known to occur in the high risk newborn, such as: cerebral hemorrhage, visual defects (retinopathy of prematurity), and hearing loss, and to provide appropriate immunization of high-risk newborns.

G) A designated person shall be designated to coordinate the local health department community nursing follow-up referral process, to direct discharge planning, to make home care arrangements, to track discharged patients, and to collect outcome information. The community nursing referral process shall consist of notifying the high-risk infant follow-up nurse in whose jurisdiction the patient resides. The Illinois Department of Human Services will identify and update referral resources for the area served by the unit.
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H) Each Level II hospital with Extended Neonatal Capabilities shall develop, with the help of the Administrative Perinatal Center, Develop a referral agreement with a neonatal follow-up clinic to provide neuro-developmental assessment and outcome data on the neonatal population. Hospital policies and procedures shall describe the at-risk population and referral procedure to be followed. Infants will be scheduled to be seen at regular intervals. Neurodevelopmental assessments will be communicated to the primary care physicians. Referrals will be made for interventional care in order to minimize neurologic sequelae. A system shall be established to track, record, and report neurodevelopmental outcome for the population, as required to support network CQI activities as developed by the Statewide Quality Council.

I) If the Level II hospital with Extended Neonatal Capabilities transports neonatal patients, the hospital shall comply with Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians and Gynecologists, the Level III transport resource requirements delineated in Section 640.43(c).

2) To provide for assisted mechanical ventilation of newborn infants beyond immediate stabilization, the Level II hospital with Extended Neonatal Capabilities shall also provide the following:

A) A pediatrician or advanced practice nurse whose professional staff privileges granted by the hospital specifically include the management of critically ill infants and newborns receiving assisted ventilation; a pediatrician receiving postgraduate training in a neonatal-perinatal medicine fellowship program accredited by the Accreditation Council of Graduate Medical Education; or an active candidate or board-certified neonatologist shall be in the hospital the entire time the infant is receiving assisted ventilation. If infants are receiving on-site assisted ventilation care from an advanced practice nurse or a physician who is not a neonatologist, an active candidate or board-certified neonatologist shall be available on call to assist in the care of those infants as needed, experienced in the management of mechanically
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ventilated infants present in the hospital during the entire time that the infant receives mechanical ventilation.

B) Suitable **backup** systems and **plans shall be in place** to prevent and respond appropriately to sudden power outage, oxygen system failure, and interruption of medical grade compressed air delivery.

C) Nurses caring for **mechanically ventilated infants who are receiving assisted ventilation** shall have documented competence and experience in the care of **those mechanically ventilated** infants.

D) A licensed respiratory care practitioner with documented competence and experience in the care of **mechanically ventilated infants who are receiving assisted ventilation** shall also be available to the nursery during the entire time that the infant receives **assisted** mechanical ventilation.

h) **Application for Designation, Redesignation or Change in Network**

1) **To be designated or to retain designation, a hospital shall submit the required application documents to the Department.** For information needed to complete any of the processes, see Section 640.50 and Section 640.60.

2) **The following information shall be submitted to the Department to facilitate the review of the hospital’s application for designation or redesignation:**

   A) **Appendix A (fully completed);**

   B) **Resource Checklist (fully completed) (Appendices L, M, N and O);**

   C) **A proposed letter of agreement between the hospital and the Administrative Perinatal Center (unsigned); and**
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D) The curriculum vitae for all directors of patient care, i.e., obstetrics, neonatal, ancillary medical, and nursing (both obstetrics and neonatal).

3) When the information described in subsection (h)(2) is submitted, the Department will review the material for compliance with this Part. This documentation will be the basis for a recommendation for approval or disapproval of the applicant hospital's application for designation.

4) The medical co-directors of the Administrative Perinatal Center (or their designees), the medical directors of obstetrics and maternal and newborn care, and a representative of hospital administration from the applicant hospital shall be present during the PAC's review of the application for designation.

5) The Department will make the final decision and inform the hospital of the official determination regarding designation. The Department's decision will be based upon the recommendation of the PAC and the hospital's compliance with this Part, and may be appealed in accordance with Section 640.45. The Department shall consider the following criteria or standards to determine if a hospital is in compliance with this Part:

A) Maternity and Neonatal Service Plan (Subpart O of the Hospital Licensing Requirements);

B) Proposed letter of agreement between the applicant hospital and its Administrative Perinatal Center in accordance with Section 640.70;

C) Appropriate outcome information contained in Appendix A and the Resource Checklist;

D) Other documentation that substantiates a hospital's compliance with particular provisions or standards of perinatal care set forth in this Part; and

E) Recommendation of Department program staff.

h) Exceptions to Level II with Extended Capabilities—Standards of Care
1) Exceptions to the standards of care set forth in this Part may be necessary based on patient care needs, current practice, outcomes and geography in the regional perinatal network. These exceptions are not intended to circumvent the Level III designation. The applicant facility or the Perinatal Center may seek the advice and consultation of the Department as well as the Perinatal Advisory Committee in regard to the conditions necessary for an exception.

2) Facilities may request an exception to care for some subgroup of neonates listed in subsection (e)(2). The exceptions to the standards of care of this Part may be granted when the facility requesting an exception demonstrates that the resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Perinatal Center or Level III facility. The resource requirements for these exceptions may be found in Section 640.43(c) for Level III. The proposed exceptions shall be determined by the applicant facility and its Perinatal Center based primarily on outcomes.

3) If the applicant facility and its Perinatal Center cannot reach agreement on any aspect of the exceptions to the standards of care of this Part, the applicant facility or Perinatal Center shall seek the advice and consultation of the Perinatal Advisory Committee (i.e., subcommittee on facility designation) to settle the dispute. Any exception to the standards of care of this Part shall be clearly defined in the proposed letter of agreement and approved by the Department before implementing the exceptions or patient care services being requested. The Department shall permit a period of testing or trial (probation) to demonstrate that the applicant facility’s resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Perinatal Center or Level III facility.

4) If a dispute between the applicant facility and its Perinatal Center cannot be resolved after consultation with the Perinatal Advisory Committee (i.e., subcommittee on facility designation), then the applicant facility, the Perinatal Center or the Perinatal Advisory Committee shall submit the dispute to the Department for settlement. The Department shall review all of the relevant information and documentation that clearly substantiates the facility’s compliance with particular provisions or standards of
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perinatal care and the recommendations of the Perinatal Advisory Committee in deciding or settling a dispute. The Department shall inform the applicant facility, the Perinatal Center and the Perinatal Advisory Committee of its decision or judgment.

5) The following information shall be submitted to the Perinatal Advisory Committee (i.e., subcommittee on facility designation) to facilitate the review of the applicant facility's application for designation with exceptions to the standards of care of this Part:

A) A proposed letter of agreement (unsigned).

B) The curriculum vitae for all directors of patient care, i.e., OB, neonatal, nursing (OB and neonatal).

C) Appendices A and B (fully completed).

D) A letter from the Perinatal Center that includes the following information:

i) List of the exceptions being requested.

ii) Sufficient information to demonstrate that the quality of care (outcomes) of the applicant facility are substantially equivalent to the appropriate standards as outlined in subsection (e) of this Section.

iii) A description of the monitoring system used when a consultation occurs between the attending physician at the referring hospital and the physician consultant at the Perinatal Center or Level III facility and it is determined that the mother or newborn infant should stay in the community hospital for care.

iv) A description of any arrangements made between the applicant facility and the Perinatal Center to seek or insure quality improvement.

6) When the information described in subsection (e) is submitted to the
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Perinatal Advisory Committee, it shall review the material for compliance with the Regionalized Perinatal Health Care Code, and shall make a recommendation for approval or disapproval of the applicant facility's application for designation with exceptions to the Department.

7) The medical co-directors of the Perinatal Center (or their designees) and the medical directors of OB and neonatology and a representative of hospital administration from the applicant facility shall be present during the Perinatal Advisory Committee’s review of the applicant facility’s application for designation with exceptions.

8) The Department shall review the submitted materials and any other documentation that clearly substantiates the facility’s compliance with particular provisions or standards of perinatal care, including quality of care (outcomes) information, and the recommendation of the Perinatal Advisory Committee, and shall make a recommendation to the Director of Public Health concerning the approval or disapproval of the applicant facility’s application for designation with exceptions.

9) The Director of Public Health shall make the final decision and inform the facility of the official determination regarding designation with exceptions to the standards of care of this Part. The Director’s decision shall be based upon the recommendation of the Perinatal Advisory Committee and the facility’s compliance with the Regionalized Perinatal Health Care Code, and may be appealed in accordance with Section 640.45. The Director of Public Health shall consider the following criteria or standards to determine if a facility is in compliance with the Code:

A) Maternity and Neonatal Service Plan (Subpart O of the Illinois Hospital Licensing Requirements).

B) Proposed letter of agreement between the applicant facility and its Perinatal Center under the provisions described in Section 640.70.

C) Appropriate outcome information contained in Appendices A and B.

D) Other documentation that clearly substantiates a facility’s compliance with particular provisions or standards of perinatal
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E) Recommendation of Department program staff.

(Source: Amended at 34 Ill. Reg. _______, effective ____________)

Section 640.43 Level III – Standards for Perinatal Care

Level III: To be designated as Level III, a hospital facility shall apply to the Department for designation; and shall comply with all of the conditions prescribed in this Part for intensive (Level III) perinatal care; of this Part and shall comply with all of the conditions prescribed in Subpart O of the Hospital Licensing Requirements (77 Ill. Adm. Code 250) promulgated by the Department which are applicable to the level of care necessary for the patients served; and in addition shall comply with the following provisions (specifics regarding standards of care for both mothers and neonates as well as resource requirements to be provided shall be defined in the hospital's letter of agreement with its Administrative Perinatal Center):

a) Level III – General Provisions

1) A Level III hospital facility shall provide all services outlined for Level I and II (Sections 640.41(a) and 640.42(a)), general, intermediate and special intensive care, as well as diagnosis and treatment of high-risk pregnancy and neonatal problems. Both the obstetrical and neonatal services shall achieve Level III capability for Level III designation. The hospital shall provide for the education of allied health professionals and the acceptance of selected maternal-fetal and neonatal transports from Level I or Level II with Extended Neonatal Capabilities hospitals.

2) The Level III hospital facility shall make available a range of technical and subspecialty consultative support such as pediatric anesthesiology, ophthalmology, pediatric surgery, genetic services, intensive cardiac services and intensive neurosurgical services.

3) To qualify as a Level III hospital facility, these standards and resource requirements are necessary to ensure adequate competence in the management of certain high-risk patients. These criteria will be assessed by reviewing the resources and outcomes of each hospital's facility.)
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admissions, and which admissions include patients who are subsequently transferred, for the three most recent calendar years, combined, for which data are available. The facility must demonstrate an adequate patient base to achieve an NICU average daily census to maintain the resources, expertise, and outcomes required.

4) A Level III hospital facility that elects not to provide all of the advanced services shall have established policies and procedures for transfer of these mothers and infants to a hospital facility that can provide the service needed.

5) Perinatal outcome statistics for the Level III facility must be substantially equivalent to those of the Perinatal Center and other designated Level III facilities.

6) This agreement should include participation in a CQI program as defined by the Department and implemented by the Perinatal Center.

5.7) The Level III hospital shall maintain a system for recording patient admissions, discharges, birth weight, outcome, complications, and transports must be maintained and must meet requirements to support network CQI activities described in the hospital's letter of agreement with the Administrative Perinatal Center as developed by the Statewide Quality Council. The hospital shall comply with the reporting requirements of the State Perinatal Reporting System, Adverse Pregnancy Outcomes Reporting System (77 Ill. Adm. Code 840).

b) Level III – Standards of Care

1) The Level III hospital shall have a policy requiring general obstetricians and newborn care physicians to obtain consultations from or transfer care to the appropriate subspecialists as outlined in the standards for Level II.

2) The Level III hospital shall accept all medically eligible Illinois residents. Medical eligibility is to be determined by the obstetric or neonatal director or his/her designee based on the Criteria for High-Risk Identification (Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians and Gynecologists).
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3) The Level III hospital shall provide or facilitate emergency transportation of patients referred to the hospital in accordance with guidelines for inter-hospital care of the perinatal patient (Guidelines for Perinatal Care). If the Level III is unable to accept the patient referred, the Administrative Perinatal Center shall arrange for placement at another Level III hospital or appropriate Level II or Level II hospital with Extended Neonatal Capabilities.

4) The Level III hospital shall have a clearly identifiable telephone number, facsimile number or other electronic communication, either a special number or a specific extension answered by unit personnel, for receiving consultation requests and requests for admissions. This number shall be kept current with the Department and with the Regional Perinatal Network.

5) The Level III hospital shall provide and document continuing education for medical, nursing, respiratory therapy, and other staff providing general, intermediate and intensive care perinatal services.

6) The Level III hospital shall provide caesarean section decision-to-incision capabilities within 30 minutes.

7) The Level III hospital shall provide data relating to its activities and shall comply with the requirements of the State Perinatal Reporting System.

8) The medical co-directors of the Level III hospital shall be responsible for developing a system ensuring adequate physician-to-physician communication. Communication with referring physicians of patients admitted shall be sufficient to report patient progress before and at the time of discharge.

9) Hospitals shall have the capability for continuous electronic maternal-fetal monitoring for patients identified at risk, with staff available 24 hours a day, including physician and nursing, who are knowledgeable of electronic maternal-fetal monitoring use and interpretation. Physicians and nurses shall complete a competence assessment in electronic maternal-fetal monitoring every two years.
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| 10) | The Level III hospital, in collaboration with the Administrative Perinatal Center, shall establish policies and procedures for the return transfer of high-risk mothers and infants to the referring hospital when they no longer require the specialized care and services of the Level III hospital. |
| 11) | The Level III hospital shall provide backup systems and plans shall be in place to prevent and respond to sudden power outage, oxygen system failure and interruption of medical grade compressed air delivery. |
| 12) | The Level III hospital shall provide or develop a referral agreement with a developmental follow-up clinic to provide neuro-developmental services for the neonatal population. Hospital policies and procedures shall describe the at-risk population and the referral procedure to be followed for enrolling the infant in developmental follow-up. Infants shall be scheduled for assessments at regular intervals. Neuro-developmental assessments shall be communicated to the primary care physicians. Referrals shall be made for interventional care in order to minimize neurologic sequelae. A system shall be established to track, record and report neuro-developmental outcome data for the population, as required to support network CQI activities. |
| 13) | Neonatal surgical services shall be available 24 hours a day. |

c) **Level III – Resource Requirements**

| 1) | Obstetric activities shall be directed and supervised by a full-time subspecialty obstetrician certified by the American Board of Obstetrics and Gynecology in the subspecialty of Maternal and Fetal Medicine, or an osteopathic physician with equivalent training and experience and certification by the American Osteopathic Board of Obstetricians and Gynecologists. The director of the obstetric services shall ensure the backup supervision of his or her services by a physician with equivalent credentials. |
| 2) | Neonatal activities shall be directed and supervised by a full-time pediatrician certified by the American Board of Pediatrics sub-board of neonatal/perinatal medicine, or a licensed osteopathic physician with equivalent training and experience and certification by the American Osteopathic Board of Pediatricians/Neonatal-Perinatal Medicine. The |
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director of the neonatal services shall ensure the backup supervision of his or her services by a physician with equivalent credentials.

3) An administrator/manager with a master's degree shall direct, in collaboration with the medical directors, the planning, development and operation of the non-medical aspects of the Level III hospital and its programs and services.

A) The obstetric and newborn nursing services shall be directed by a full-time nurse experienced in perinatal nursing, with a master's degree.

B) Half of all neonatal intensive care direct nursing care hours shall be provided by registered nurses who have two years or more of nursing experience in a Level III NICU. All NICU direct nursing care hours shall be provided or supervised by registered nurses who have advanced neonatal intensive care training and documented competence in neonatal pathophysiology and care technologies used in the NICU. All nursing staff working in the NICU shall have yearly competence assessment in neonatal intensive care nursing.

4) Obstetric anesthesia services under the direct supervision of a board-certified anesthesiologist with training in maternal, fetal and neonatal anesthesia shall be available 24 hours a day. The directors of obstetric anesthesia services shall ensure the backup supervision of their services when they are unavailable.

5) Pediatric-neonatal respiratory care services shall be directed by a full-time respiratory care practitioner with a bachelor's degree.

A) The respiratory care practitioner responsible for the NICU shall have at least three years of experience in all aspects of pediatric and neonatal respiratory care at a Level III NICU and completion of the neonatal/pediatrics specialty examination of the National Board for Respiratory Care.

B) Respiratory care practitioners with experience in neonatal ventilatory care shall staff the NICU according to the respiratory
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care requirements of the patient population, with a minimum of one dedicated neonatal respiratory care practitioner for newborns on assisted ventilation, and with additional staff provided as necessary to perform other neonatal respiratory care procedures.

6) A physician for the program shall assume primary responsibility for initiating, supervising and reviewing the plan for management of distressed infants in the delivery room. Hospital policies and procedures shall assign responsibility for identification and resuscitation of distressed neonates to individuals who are both specifically trained and immediately available in the hospital at all times. Capability to provide neonatal resuscitation in the delivery room may be satisfied by current completion of a neonatal resuscitation program by medical, nursing and respiratory care staff or a rapid response team.

7) A board-certified or active candidate obstetrician shall be present and available in the hospital 24 hours a day. Maternal-fetal medicine consultation shall be available 24 hours a day.

8) A board-certified neonatologist, active candidate neonatologist or a pediatrician receiving postgraduate training in a neonatal-perinatal medicine fellowship program accredited by the Accreditation Council of Graduate Medical Education shall be present and available in the hospital 24 hours a day to provide care for newborns in the NICU.

9) Neonatal surgical services shall be supervised by a board-certified surgeon or active candidate in pediatric surgery appropriate for the procedures performed at the Level III hospital.

10) Neonatal surgical anesthesia services under the direct supervision of a board-certified anesthesiologist with extensive training or experience in pediatric anesthesiology shall be available 24 hours a day.

11) Neonatal neurology services under the direct supervision of a board-certified or active candidate pediatric neurologist shall be available for consultation in the NICU 24 hours a day.
12) Neonatal radiology services under the direct supervision of a radiologist with extensive training or experience in neonatal radiographic and ultrasound interpretation shall be available 24 hours a day.

13) Neonatal cardiology services under the direct supervision of a pediatric board-certified or active candidate by the American Board of Pediatrics sub-board of pediatric cardiology shall be available for consultation 24 hours a day. In addition, cardiac ultrasound services and pediatric cardiac catheterization services by staff with specific training and experience shall be available 24 hours a day.

14) A board-certified or active candidate ophthalmologist with experience in the diagnosis and treatment of the visual problems of high-risk newborns (e.g., retinopathy of prematurity) shall be available for appropriate examinations, treatment and follow-up care of high-risk newborns.

15) Pediatric sub-specialists with specific training and extensive experience or subspecialty board certification or active candidacy (where applicable) shall be available 24 hours a day, including, but not limited to, pediatric urology, pediatric otolaryngology, neurosurgery, pediatric cardiothoracic surgery and pediatric orthopedics appropriate for the procedures performed at the Level III hospital.

16) Genetic counseling services shall be available for inpatients and outpatients, and the hospital shall provide for genetic laboratory testing, including, but not limited to, chromosomal analysis and banding, fluorescence in situ hybridization (FISH), and selected allele detection.

17) The Level III hospital shall designate at least one person to coordinate the community nursing follow-up referral process, to direct discharge planning, to make home care arrangements, to track discharged patients, and to ensure appropriate enrollment in a developmental follow-up program. The community nursing referral process shall consist of notifying the follow-up nurse in whose jurisdiction the patient resides of discharge information on all patients. The Illinois Department of Human Services will identify and update referral resources for the area served by the unit. The hospital shall establish a protocol that defines the educational criteria necessary for commonly required home care modalities, including, but not limited to,
continuous oxygen therapy, electronic cardio-respiratory monitoring, technologically assisted feeding and intravenous therapy.

18) One or more full-time social workers with perinatal/neonatal experience shall be dedicated to the Level III hospital.

19) One registered pharmacist with experience in perinatal pharmacology shall be available for consultation on therapeutic pharmacology issues 24 hours a day.

20) One dietitian with experience in perinatal nutrition shall be available to plan diets and education to meet the special needs of high-risk mothers and neonates in both inpatient and outpatient settings.

1) The Level III facility shall be responsible for provision of continuing education for medical, nursing, respiratory therapy, and other staff providing general, intermediate, and intensive care perinatal services with evidence of a yearly competence assessment appropriate to the patient population served.

2) The Level III facility shall accept all medically eligible Illinois residents. Medical eligibility is to be determined by the obstetrical or neonatal director or his/her designee based on the Department's standards for "Criteria for High-Risk Identification (Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians and Gynecologists)." If the facility is unable to accept the patient referred, the unit shall arrange for admission to another Level III facility or appropriate Level II facility.

3) The Level III facility shall provide or arrange emergency transportation of patients referred to the unit in accordance with guidelines for interhospital care of the perinatal patient (Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians and Gynecologists). Decisions relating to transportation shall be made by the appropriate neonatal or obstetric medical director or his/her designee. The director shall determine:

A) When to dispatch transportation from the facility or to use transportation facilities from the referring hospital;
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B) When to use ground or air transportation;

C) The kind of vehicle to be used;

D) The staff who should accompany the patient (nurse, house staff, attending physician, respiratory therapist, or other related personnel) assuring that the staff selected is trained and prepared in emergency obstetrics or neonatology. The facility shall provide any staff attendants required to transport the patient when the trip is dispatched from the facility;

E) Whether transportation can be delayed;

F) Priorities of need;

G) Recommendations for support care to stabilize the patient until transport.

4) Medical director neonatal: to direct the neonatal portion of the program. Neonatal activities shall be directed and supervised by a full-time pediatrician certified by the American Board of Pediatrics Sub-Board of Neonatal/Perinatal Medicine or a licensed osteopathic physician with equivalent training and experience and certified by the American Osteopathic Board of Pediatricians/Neonatal-Perinatal Medicine. The directors of the neonatal services shall ensure the back-up supervision of their services when they are unavailable.

5) Medical director obstetrics: to direct the obstetric portion of the program. Level III obstetric activities shall be directed and supervised by a full-time subspecialty obstetrician certified by the American Board of Obstetrics and Gynecology in the subspecialty of Maternal and Fetal Medicine or a licensed osteopathic physician with equivalent training and experience and certified by the American Osteopathic Board of Obstetricians and Gynecologists. Obstetric anesthesia services under the direct supervision of a board certified anesthesiologist with training in maternal, fetal and neonatal anesthesia shall be available 24 hours a day. The directors of the obstetric services shall ensure the back-up supervision of their services when they are unavailable.
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6) An administrator/manager with a master's degree: to direct, in collaboration with the medical directors, the planning, development and operations of the non-medical aspects of the Level III facility and its programs and services.

7) Continuing education for health professionals.

8) Reporting program information: the Level III facility shall provide data relating to its activities and report information as required by the Department. Admission data, mortality, morbidity and other required data shall be reported on all admissions to this unit. This will include full compliance with the Adverse Pregnancy Outcomes Reporting System and the Perinatal Tracking System.

9) The Level III facility shall have a clearly identifiable telephone and facsimile number, either a special number or a specific extension answered by unit personnel for receiving consultation requests and requests for admissions. This number shall be kept current with the Department and with the regional perinatal network.

10) The medical co-directors of the Perinatal Center shall be responsible for developing a system ensuring adequate physician-to-physician communications. Communications with referring physicians of patients admitted shall be sufficient to report patient progress before and at time of discharge.

11) Continuous electronic maternal-fetal monitoring and staff knowledgeable in its use and interpretation shall be available 24 hours a day. In addition, the Level III facility shall provide appropriate ultrasound available on the OB floor.

12) The Level III facility shall designate at least one person to coordinate the community nursing follow-up referral process, to direct discharge planning, to make home care arrangements, to track discharged patients, to ensure appropriate enrollment in a developmental follow-up program, and to collect outcome information. The community nursing referral process shall consist of notifying the follow-up nurse, in whose jurisdiction the patient resides, of discharge information on all patients. The Department
shall identify and update referral resources for the area served by the unit.

13) The Level III facility shall establish policies and procedures for the referral or transport of high-risk mothers and infants who require specialized care or services not currently available at the Level III facility to the appropriate facility that can provide the service needed.

14) The Level III facility shall establish policies and procedures for the return transfer of high-risk mothers and infants to the referring facility when they no longer require the specialized care and services of the Level III facility.

15) The pediatric neonatal respiratory therapy services shall be directed by a full-time licensed respiratory care practitioner with at least three years experience in all aspects of pediatric and neonatal respiratory therapy, preferably with a bachelor’s degree and one successful completion of the neonatal/pediatrics specialty examination of the National Board for Respiratory Care.

16) A physician for the program shall be designated to assume primary responsibility for initiating, supervising and reviewing the plan for management of depressed infants in the delivery room. Policies and procedures shall assign responsibility for identification and resuscitation of distressed neonates to individuals who are both specifically trained and available in the hospital at all times, such as another physician, a nurse with training and experience in neonatal resuscitation or licensed respiratory care practitioner. Individuals assigned to perform neonatal resuscitation shall have documented evidence of current completion of a neonatal resuscitation course. It is further recommended that physicians and/or advanced practice nurses who care for newborns have documented evidence of completion of a neonatal resuscitation course.

17) To provide for mechanical ventilation of newborn infants beyond the immediate stabilization, a physician or advanced practice nurse experienced in the management of mechanically ventilated infants must be present in the hospital during the entire time that the infant receives mechanical ventilation. The Level III facility shall provide suitable backup systems and planning to prevent and respond appropriately to sudden power outage, oxygen system failure, and interruption of medical grade compressed air delivery.
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18) To care for the high-risk pregnancy and for resulting infants whose birth weight is less than 1250 grams or whose gestational age is less than 30 weeks, the Level III facility shall have the perinatal leadership detailed above as well as the following resources:

A) A board certified or active candidate obstetrician shall be present and available in-house, 24 hours a day. Maternal fetal medicine consultation must be available 24 hours a day. Obstetric anesthesia services under the direct supervision of a board certified anesthesiologist with extensive training or experience in maternal, fetal and neonatal anesthesia shall be available 24 hours a day.

B) Preventive services designated to prevent, detect, diagnose and treat conditions known to occur in the high-risk newborn, such as: cerebral hemorrhage, visual defects (retinopathy of prematurity), and hearing loss, and to provide appropriate immunization of high-risk newborns.

C) A board certified or active candidate ophthalmologist with experience in the diagnosis and treatment of the visual problems of high-risk newborns (retinopathy of prematurity) shall be available to the nursery for appropriate examinations, treatment and follow-up care of high-risk newborns.

D) Neonatal surgical (general), neonatal surgical anesthesia, and neonatal radiologic services detailed in subsections (c)(19)(A), (B), (C), and (D) of this Section.

E) Half of all neonatal intensive care direct nursing care hours shall be provided by licensed registered nurses who have two years or more nursing experience in a Level III neonatal intensive care unit. All neonatal intensive care direct nursing care hours shall be provided or supervised by licensed registered nurses who have advanced neonatal intensive care training and documented competence in neonatal pathophysiology and care technologies used in the Neonatal Intensive Care Unit. Evidence of current completion of a neonatal resuscitation course and a yearly competence assessment in neonatal intensive care nursing shall be
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required of all nursing staff working in the NICU.

E) Licensed respiratory care practitioners with experience in neonatal ventila
tory care shall staff the NICU according to the respiratory care requirements of the patient population with a minimum of one dedicated neonatal licensed respiratory care practitioner for newborns on mechanical ventilators with additional staff provided as necessary to perform other neonatal respiratory care procedures. All direct respiratory care hours shall be provided or supervised by licensed respiratory care practitioners with 2 years or more neonatal ventilatory care experience at a Level III Neonatal Intensive Care Unit. Evidence of completion of a neonatal resuscitation course and a yearly competence assessment in neonatal respiratory pathophysiology and respiratory care technology are required of all staff providing respiratory care in the NICU.

G) Provide or develop a referral agreement with a follow-up clinic to provide neuro-developmental outcome data on the neonatal population. Institutional policies and procedures will describe the at-risk population and the referral-neonatal procedure to be followed. Infants will be scheduled for assessments at regular intervals. Neurodevelopmental assessments will be communicated to the primary care physicians. Referrals will be made for interventional care in order to minimize neurologic sequelae. A system shall be established to track, record, and report neurodevelopmental outcome data for the population, as required to support network CQI activities as developed by the Statewide Quality Council.

H) A protocol shall be established that defines the educational criteria necessary for commonly required home care modalities, including but not limited to continuous oxygen therapy, electronic cardiorespiratory monitoring, technologically assisted feeding and intravenous therapy.

I) One registered pharmacist with experience in perinatal pharmacology shall be available for consultation on therapeutic pharmacology issues 7 days a week.
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J) One or more full-time licensed medical social workers with relevant experience shall be dedicated to the Level III perinatal facility. Time allotment should be based on the size of the unit and characteristics and needs of the patient population.

19) In order to provide comprehensive neonatal surgical services, including but not limited to infants with congenital anomalies or congenital heart disease, the Level III facility shall provide the following resources:

A) Neonatal surgical services shall be available 24 hours a day and shall be supervised by a surgeon board certified or board eligible in pediatric surgery appropriate for the procedures performed at the Level III facility.

B) Surgical specialists with specific training and extensive experience and/or subspecialty board certification or active candidacy (where applicable) shall be available 24 hours a day in the following subspecialties: pediatric urology, pediatric otolaryngology, neurosurgery, pediatric cardiothoracic surgery, pediatric orthopedics appropriate for the procedures performed at the Level III facility.

C) Neonatal surgical anesthesia services under the direct supervision of a board certified anesthesiologist with extensive training or experience in pediatric anesthesiology shall be available 24 hours a day.

D) Neonatal radiology services under the direct supervision of a radiologist with extensive training or experience in neonatal radiographic and ultrasound interpretation shall be available 24 hours a day.

E) Neonatal neurology services under the direct supervision of a board certified or active candidate pediatric neurologist shall be available for consultation in the intensive care nursery 24 hours a day.

F) Neonatal cardiology services under the direct supervision of a
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pediatrician board certified or active candidate by the American Board of Pediatrics sub-board of pediatric cardiology shall be available to consult in the nursery 24 hours a day. In addition, cardiac ultrasound services and pediatric cardiac catheterization services by staff with specific training and experience shall be available as needed 24 hours a day.

G) The neonatal intensive care nursing and respiratory care resource requirements listed in subsections (c)(15) and (18) of this Section, respectively.

H) Genetic counseling services for inpatients and outpatients and appropriate provisions for genetic laboratory testing, including but not limited to chromosomal analysis and banding, FISH, and selected allele detection.

20) The obstetric-newborn nursing services shall be directed by a full-time nurse experienced in perinatal nursing preferably with a master’s degree.

21) One or more full-time licensed medical social workers with relevant experience shall be dedicated to the Level III perinatal facility. Time allotment will be based on the size of the unit and characteristics and needs of the patient population.

22) Respiratory therapists with experience in neonatal care should be available with staffing based on the respiratory care requirements of the patient population (minimum of 1 respiratory therapist for every 4 patients on mechanical ventilators with additional staff provided as necessary to perform other respiratory care procedures).

23) One registered dietitian with experience in perinatal nutrition and a certified diabetic educator shall be available to plan diets to meet the special needs of high-risk mothers and neonates in both inpatient and outpatient settings.

d) Application for Hospital Designation, Redesignation or Change in Network

1) To be designated or to retain designation, a hospital shall submit the required application documents to the Department. For information
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needed to complete any of the processes, see Section 640.50 and Section 640.60.

2) The following information shall be submitted to the Department to facilitate the review of the hospital's application for designation or redesignation:

A) Appendix A (fully completed);

B) Resource Checklist (fully completed) (Appendices L, M, N and O);

C) A proposed letter of agreement between the hospital and the Administrative Perinatal Center (unsigned); and

D) The curriculum vitae for all directors of patient care, i.e., obstetrics, neonatal, ancillary medical, and nursing (both obstetrics and neonatal).

3) When the information described in subsection (d)(2) is submitted, the Department will review the material for compliance with this Part. This documentation will be the basis for a recommendation for approval or disapproval of the applicant hospital's application for designation.

4) The medical co-directors of the Administrative Perinatal Center (or their designees), the medical directors of obstetrics and maternal and newborn care, and a representative of hospital administration from the applicant hospital shall be present during the PAC's review of the application for designation.

5) The Department will make the final decision and inform the hospital of the official determination regarding designation. The Department's decision will be based upon the recommendation of the PAC and the hospital's compliance with this Part, and may be appealed in accordance with Section 640.45. The Department will consider the following criteria to determine if a hospital is in compliance with this Part:

A) Maternity and Neonatal Service Plan (Subpart O of the Hospital Licensing Requirements);
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B) Proposed letter of agreement between the applicant hospital and its Administrative Perinatal Center in accordance with Section 640.70;

C) Appropriate outcome information contained in Appendix A and the Resource Checklist;

D) Other documentation that substantiates a hospital's compliance with particular provisions or standards of perinatal care set forth in this Part; and

E) Recommendation of Department program staff.

d) Exceptions to Level III—Standards of Care

1) Exceptions to the standards of care set forth in this Part may be necessary based on patient care needs, current practice, outcomes, and geography in the regional perinatal network. These exceptions are not intended to circumvent the Level III capabilities designation. The applicant facility or the Perinatal Center may seek the advice and consultation of the Department as well as the Perinatal Advisory Committee in regard to the conditions necessary for an exception.

2) Exceptions to the standards of care of this Part may be granted when the facility requesting an exception demonstrates that the resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Level III facility or Perinatal Center in its Regional Perinatal Network. The proposed exceptions shall be determined by the applicant facility and its Perinatal Center based primarily on outcomes.

3) If the applicant facility and its Perinatal Center cannot reach agreement on any aspect of the exceptions to the standards of care of this Part, the applicant facility or Perinatal Center shall seek the advice and consultation of the Perinatal Advisory Committee (i.e., subcommittee on facility designation). Any exception to the standards of care of this Part shall be clearly defined in the proposed letter of agreement and approved by the Department before implementing the exceptions or patient care services being requested. The Department shall permit a period of testing or trial
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(probabon) to demonstrate that the applicant facility's resources and quality of care (outcomes) are substantially equivalent to the resources and quality of care for any Level III facility.

4) If a dispute between the applicant facility and its Perinatal Center cannot be resolved after consultation with the Perinatal Advisory Committee (i.e., subcommittee on facility designation), then the applicant facility, the Perinatal Center or the Perinatal Advisory Committee shall submit the dispute to the Department for settlement. The Department shall review all of the relevant information and documentation that clearly substantiates the facility's compliance with particular provisions or standards of perinatal care and the recommendations of the Perinatal Advisory Committee in deciding or settling a dispute. The Department shall inform the applicant facility, the Perinatal Center and the Perinatal Advisory Committee of its decision or judgment.

5) The following information shall be submitted to the Perinatal Advisory Committee (i.e., subcommittee on facility designation) to facilitate the review of the applicant facility’s application for designation with exceptions to the standards of care of this Part:

A) A proposed letter of agreement (unsigned).

B) The curriculum vitae for all directors of patient care, i.e., OB, neonatal, nursing (OB and neonatal).

C) Appendices A and B (fully completed).

D) A letter from the Perinatal Center that includes the following information:
   
   i) List of the exceptions being requested.
   
   ii) Sufficient data/information to demonstrate that the quality of care (outcomes) of the applicant facility are substantially equivalent to the appropriate standards as outlined in this Section.
   
   iii) A description of the monitoring system used when a
consultation occurs between the attending physician at the
referring hospital and the physician consultant at the
Perinatal Center or Level III facility and it is determined
that the mother or newborn infant should stay in the
community hospital for care.

iv) A description of any arrangements made between the
applicant facility and the Perinatal Center to seek or insure
quality improvement.

6) When the information described is submitted to the Perinatal Advisory
Committee, it shall review the material for compliance with the
Regionalized Perinatal Health Care Code, and shall make a
recommendation for approval or disapproval of the applicant facility's
application for designation with exceptions to the Department.

7) The medical co-directors of the Perinatal Center (or their designees) and
the medical directors of OB and neonatology and a representative of
hospital administration from the applicant facility shall be present during
the Perinatal Advisory Committee's review of the applicant facility's
application for designation with exceptions.

8) The Department shall review the submitted materials and any other
documentation that clearly substantiates the facility's compliance with
particular provisions or standards of perinatal care, including quality of
care (outcomes) information and the recommendation of the Perinatal
Advisory Committee, and shall make a recommendation to the Director of
Public Health concerning the approval or disapproval of the applicant
facility's application for designation with exceptions.

9) The Director of Public Health shall make the final decision and inform the
facility of the official determination regarding designation with exceptions
to the standards of care of this Part. The Director's decision shall be based
upon the recommendation of the Perinatal Advisory Committee and the
facility's compliance with the Regionalized Perinatal Health Care Code,
and may be appealed in accordance with Section 640.45. The Director of
Public Health shall consider the following criteria or standards to
determine if a facility is in compliance with the Code:
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A) Maternity and Neonatal Service Plan (Subpart O of the Illinois Hospital Licensing Requirements).

B) Proposed letter of agreement between the applicant facility and its Perinatal Center in accordance with the provisions described in Section 640.70.

C) Appropriate outcome information contained in Appendices A and B.

D) Other documentation that clearly substantiates a facility’s compliance with particular provisions or standards of perinatal care.

E) Recommendation of Department program staff.

e) The Department, in conjunction with the Perinatal Advisory Committee, shall develop a plan for the evaluation of the Regionalized Perinatal Health Care Code to include, but not be limited to, morbidity and birthweight-specific mortality indicators. A report shall be prepared annually.

f) The Department shall develop a plan wherein the degree of compliance with these standards is determined on a periodic basis not to exceed three years.

g) The standards identified throughout this Section do not apply to infants who, after having completed initial therapy, are transferred back to the referring hospital for continuing care. The capability of the hospital to provide necessary services for such infants is to be determined by mutual consent with the Perinatal Center and the issue addressed in the letter of agreement.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.44 Administrative Perinatal Center

a) To be designated as an Administrative Perinatal Center, a hospital facility shall submit an application to the Department for a grant to provide financial support to assist the Department in the implementation and oversight of the Regionalized Perinatal Health Care Program; the designation, and shall comply with all of the conditions described for intensive (Level III) perinatal care in Section 640.43 and shall comply with all of the conditions described
in Subpart O of the Hospital Licensing Requirements. The Administrative Perinatal Center (77 Ill. Adm. Code 250) promulgated by the Department which are applicable to the level of care necessary for the patients served, and in addition shall comply with the following:

a) Administrative Perinatal Center – General Provisions

1) An Administrative Perinatal Center shall be a university or university-affiliated hospital, having Level III hospital designation. An Administrative Perinatal Center may be composed of one or more institutions. The Administrative Perinatal Center shall be facility responsible for the administration and implementation of the Department's regionalized perinatal health care program, including but not limited to:

A) Continuing education for health care professionals; an Administrative Perinatal Center may be composed of one or more institutions.

B) Leadership and implementation of CQI projects, including morbidity and mortality reviews at regional network hospitals;

C) Maternal and neonatal transport services;

D) Consultation services for high-risk perinatal patients;

E) Follow-up developmental assessment programs; and

F) Laboratory facilities and services available to regional network hospitals.

2) An Administrative Perinatal Center shall be capable of providing the highest level of care within a regional network appropriate to maternal and neonatal high-risk patients. The following services shall be available:

A) Consultants in the various medical-pediatric-surgical subspecialties including, but not limited to, cardiac, neurosurgery, genetics, and other support services;
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B) Follow-up developmental assessment program;

C) Maternal and neonatal transport services; and

D) Laboratory facilities available to the hospitals within the regional perinatal network.

b) The Department will designate an Administrative Perinatal Center within each regional perinatal network to be responsible for the administration and implementation of the Department's Regionalized Perinatal Health Care Program.

c) The Administrative Perinatal Center will be responsible for providing leadership in the design and implementation of the Department's Continuous Quality Improvement (CQI Program, including) program. This will include the establishment and maintenance of a regional quality improvement structure (Regional Quality Council) for the implementation of the Department's Quality Improvement in Perinatal Program (QIPP).

d) The Administrative Perinatal Center shall establish a Joint Mortality and Morbidity Review Committee with the affiliated regional network hospitals. The Joint Mortality and Morbidity Review Committee shall review all perinatal deaths and selected morbidity, including, but not limited to, transports of neonates born with handicapping conditions, or developmental disabilities, or unique medical conditions. This review shall also include a periodic comparison of total perinatal mortality and the numbers attributable to categories of complications. Membership on the Joint Mortality and Morbidity Review Committee shall include, but not be limited to, pediatricians, obstetricians, family practice physicians, nurses, quality assurance, pathology, and hospital administration staff and representatives from the hospital's Administrative Perinatal Center. The network administrator shall prepare a yearly synopsis of the Regionalized Perinatal Network's perinatal deaths. This synopsis shall include statistical information, as well as an identification of the factors contributing to deaths that are identified as potentially avoidable. The synopsis shall be shared with the Regional Quality Council. The Regional Quality Council shall develop, for the Regional Perinatal Network, an action plan to address issues of preventability. The Regional Quality Council's action plan shall be forwarded to the Department.
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The membership of the Regional Quality Council shall include representatives from all levels and disciplines of perinatal health care providers.

e(d) Perinatal Program Oversight/Agency Review

1) The Department shall work in conjunction with the Administrative Perinatal Centers to conduct site visits at network hospitals to assure development of a plan that has the degree of compliance with this Part Section's standards determined on a periodic basis not to exceed three years.

2) The requirements of standards identified throughout this Part Section do not apply to infants who, after having completed initial therapy, are transferred back to the referring hospital for continuing care. The capability of the hospital to provide necessary services for these infants shall be determined by mutual consent with the Administrative Perinatal Center and the issue addressed in the letter of agreement.

3) Administrative Perinatal Centers shall provide information to the Department no less frequently than quarterly. These reports shall include, but not be limited to, network education activities; network meetings; overview of CQI activities; schedule of mortality and morbidity review meetings; and schedule of proposed and completed network hospital site visits. The Department shall develop a methodology for incorporating perinatal outcomes information into the perinatal facility designation, redesignation, and exception processes. The Department shall seek input on the development of this methodology from the Perinatal Advisory Committee. This input shall include, but not necessarily be limited to, the identification and selection of indicators, defining standards for each level of care and the methodology for applying the standards to the designation, redesignation and/or exception processes.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.45 Department of Public Health Agency Action

a) Department Review
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1) The Department will develop a plan for determining the degree of compliance with this Part on a periodic basis not to exceed three years.

2) During the site visit, the hospital will receive, a determination of substantial compliance or substantial failure.

b) Department Oversight

The Department may deny designation or redesignation or revoke designation of any hospital that Any designated facility which fails to achieve substantial compliance with the requirements for its designation may have its application for designation or redesignation set forth in this Part denied or its designation revoked by the Department. The Department will consider the following factors relevant in deciding whether to deny designation or redesignation or to revoke designation: failure to comply with the requirements for designation will result in denial or revocation:

1) Failure to complete the letter of agreement within 90 days after receipt of the official site visit report;

2) Failure to have and to comply with an approved Maternal and Neonatal Service Plan;

3) Failure to complete the site visit and accompanying site visit report documentation, i.e., Standardized Perinatal Site Visit Protocol and Outcome Oriented Data;

4) Failure to comply Applicant facility has not demonstrated compliance with all of the requirements of this Part for the level of designation.

5) Failure to participate Applicant facility has failed to demonstrate adequate participation in and comply with continuous Quality Improvement (CQI programs) activities, including the Regional Quality Council or other programs designed or implemented by the Administrative Perinatal Center implemented by the Perinatal Center or the Department;

6) Failure to notify the Department of the loss of, or change in, an essential resource required for its level of designation;

b) The circumstances under which an application or designation may be denied or
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revoked include:

1) failure to comply with the requirements for designation has been noted by the Department; and

2) when the institution has been notified by the Department as to the specific item or items not in compliance with the requirements for designation, and when the institution has not corrected the matter within a reasonable period of time (90 days).

c) The Department will notify the hospital within 30 days after the site visit as to whether the hospital has achieved substantial compliance with this Part. The notification will include specific requirements with which substantial compliance has not been achieved. If the hospital has not achieved substantial compliance within 90 days after having received the notice, the Department will deny or revoke the designation. If progress toward substantial compliance is being made, per written documentation of the Administrative Perinatal Center, the Department will continue to work with the hospital and its Administrative Perinatal Center to achieve designation.

d) The provisions of the Illinois Administrative Procedure Act [5 ILCS 100] and the Department's Rules of Practice and Procedure in Administrative Hearings (77 Ill. Adm. Code 100) shall apply to all hearings challenging Department decisions, including those related to designation, redesignation, and denial or revocation of designation.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.50 Designation and Redesignation of Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities, and Level III Perinatal Hospitals and Administrative Perinatal Centers Facilities

a) The hospital shall declare by means of a letter of intent to the Department and the affiliated Administrative Perinatal Center that it seeks designation as a hospital with no OB services, or as a facility for the delivery of general perinatal care (Level I), or intermediate perinatal care (Level II), or Level II with Extended Neonatal Capabilities, or intensive care (Level III) in a one of the Regional Perinatal Network Networks of the Illinois Perinatal Health Care Program.
The Department **will** acknowledge the letter of intent.

The **Administrative** Perinatal Center shall arrange a site visit to the applicant **hospital** facility. The hospital shall prepare the designation/redesignation documents in accordance with Section 640.60. The site visit team for Level I, II, II with Extended Neonatal Capabilities, and III perinatal **hospitals** shall consist of five members: three from the **Administrative** Perinatal Center of the hospital's Regional Perinatal Network, including the Directors of Neonatology and Maternal-Fetal Medicine or their designees and the **Perinatal Network Administrator**: a representative of nursing; one representative from the PAC; and one representative of the Department. The site visit team shall review the capabilities of the applicant **hospital** facility based on the requirements outlined in the letter of agreement between the applicant **hospital** facility and the **Administrative** Perinatal Center. The site visit team shall complete the Standardized Perinatal Site Visit Protocol (see Appendix A) and Outcome Oriented Data (see Appendix B) and submit these materials to the medical directors of the facility visited for their review and comment within 30 days from the date of the site visit. **The Administrative Perinatal Center shall collaborate with the Department to develop a summary site visit report within 60 days after the site visit. This report shall be sent to the hospital within 90 days after the site visit.**

The Department **will** coordinate the site visit for **Administrative** Perinatal Centers. The team shall consist of five members: one Director of Neonatology, one Director of Maternal-Fetal Medicine and one **Perinatal Network Administrator** from a non-contiguous Center; one representative from the PAC; and one representative of the Department. **The Department shall collaborate with the site visit team to develop a summary site visit report within 60 days after the site visit. This report shall be forwarded to the hospital within 90 days after the site visit.** The site visit team shall complete the Standardized Perinatal Site Visit Protocol and Outcome Oriented Data and submit these materials to the Perinatal Center for their review and comment within 30 days from the date of the site visit.

The complicated site visit report shall then be forwarded to the Department within 60 days from the date of the site visit. Department staff shall be available for technical and administrative consultation concerning the site visit.

The Department, having received the information requested concerning the
applicant facility, the site visit report and the letter of agreement between the applicant facility and the Perinatal Center, shall submit these materials to the Perinatal Advisory Committee for review. The applicant facility may request to appear or be asked to appear before the Perinatal Advisory Committee during its review of the application.

g) When the information described in Section 640.60 is submitted to the Perinatal Advisory Committee, it shall review the material, and the report of the site visit, for compliance with the Regionalized Perinatal Health Care Code; and shall make a recommendation for approval or disapproval of the facility's application for designation to the Department.

e) The Department will review the submitted materials, any other documentation that clearly substantiates a hospital's compliance with particular provisions or standards for perinatal care, and the recommendation of the PAC, Perinatal Advisory Committee, and shall make a recommendation to the Director of Public Health concerning designation of the facility as an affiliated perinatal facility (Level I, Level II, Level II with Extended Capabilities, Level III) to a designated Perinatal Center in the Statewide Regionalized Perinatal Health Care Program.

f) The Department will Director of Public Health shall make the final decision and inform the hospital of the official determination regarding designation. The Department's Director's decision will be based upon the recommendation of the PAC, Perinatal Advisory Committee and the hospital's compliance with this Part, the Regionalized Perinatal Health Care Code, and may be appealed in accordance with Section 640.45. A 12-month to 18-month follow-up review will be scheduled for any increase in hospital designation to assess compliance with the requirements of this Part that are applicable to the new level of designation. The Director shall consider the following criteria or standards to determine if a hospital is in compliance with this Part:

1) Maternity and Neonatal Service Plan (Subpart O of the Hospital Licensing Requirements);

2) Proposed letter of agreement between the applicant hospital and its Administrative Perinatal Center in accordance with Section 640.70;
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3) Appropriate outcome information contained in Appendix A and the Resource Checklist (Appendices L, M, N and O);

4) Other documentation that substantiates a hospital's compliance with particular provisions or standards of perinatal care set forth in this Part; and

5) Recommendation of Department program staff.

1) Confirmation of an approved Maternity and Neonatal Service Plan at the level of care for which the facility is seeking designation.

2) An approved letter of agreement between the applicant facility and its Perinatal Center in accordance with the provisions described in Section 640.70.

3) A completed Standardized Site Visit Protocol and Outcome Orientated Data report in accordance with the provisions described in Section 640.50(c)-(e).

4) Other documentation that clearly substantiates a facility's compliance with particular provisions or standards for perinatal care.

5) Recommendation of Department program staff.

The Department will review all designations at least shall be reviewed by the Department every three years or when the Department may deem necessary to assure that the designated hospitals continue to comply with the requirements of the perinatal plan. Circumstances that may influence the Department to review a hospital's facility's designation more frequently other than every three years could include:

1) A hospital's device - When a hospital wanted to expand or reduce services;

2) Poor perinatal outcomes;

3) Change in Administrative Perinatal Center or Network affiliation;

4) Change in Availability of human resources that would have an impact on
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the hospital’s ability to comply with the required resources for the level of designation; or to complete Department site visit.

5) An Administrative When a Perinatal Center finds and the Department concurs or determines that a hospital is not appropriately participating in and complying with Continuous Quality Improvement (CQI) programs, activities and/or the Quality Improvement in Perinatal Program (QIPP).

Existing designations shall be effective until redesignation is accomplished.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.60 Application Information for Hospital Facility Designation and Redesignation as a Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities, and Level III Perinatal Hospital Facilities and Administrative Perinatal Center, and Assurances Required of Applicants

a) Applicant hospitals shall provide the Department with the following information based on standards and resources for the applicable level of designation. The information shall include, but not be limited to the following (see Appendix A): which may be included in its Maternity and Neonatal Service Plan or letter of agreement:

1) A definition of the geographic area the hospital currently serves or plans to serve.

2) A physical description of the hospital facility, compliance with Subpart O of the Hospital Licensing Requirements 77 Ill. Adm. Code 250, and a description of the maternity and nursery units currently in place or in preparation for operation should the hospital facility be designated.

3) A physical description of the hospital’s staffing in accordance with this Part, those additional standards or designation described in the Regionalized Perinatal Health Care Code as follows:

A) Social work and nutrition services shall be available through a hospital department for Level II and Level III designation.
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B) Names, titles and contact numbers shall be provided for the Director or Chairman of Maternal-Fetal Medicine, Neonatology, Obstetrics, Pediatrics and Neonatal Services, Chief Nursing Supervisor, Nursing Supervisor of Maternity Unit; names and contact numbers of medical staff members in maternal-fetal medicine, obstetrics and gynecology, neonatology, obstetric anesthesiology, family practice, anesthesiology; listing of anesthetists, staff for respiratory therapy, nurse-midwives, and involved house staff.

C) A description of the current nurse/patient ratios in the nursery, delivery room, postpartum floor and intermediate or intensive care newborn nurseries for all shifts.

D) A description of the qualifications of nursing personnel involved in the newborn nursery, delivery room and postpartum area.

E) A description of the staff plans to assure that maternity/nursery staff are trained and prepared to stabilize infants prior to transfer, and are available 24 hours a day.

4) A description giving evidence that the hospital's laboratory, X-ray and respiratory therapy equipment and capabilities meet all of the conditions described in 77 Ill. Adm. Code 250, Subpart O of the Hospital Licensing Requirements and are available 24 hours a day in-house.

A) Continuous Evidence is required that continuous electronic maternal-fetal monitoring shall be available, and staff with knowledge in its use and interpretation shall be available 24 hours a day for Level I, Level II, Level II with Extended Neonatal Capabilities, and Level III designation applicants.

B) Level III and Administrative Perinatal Centers shall provide Level II ultrasound available on the obstetric floor.

C) Level I ultrasound and staff knowledgeable in its use and interpretation shall be available at Level II hospitals on a 24-hour-a-day basis.
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5) A description of the capabilities for or capabilities planned for (giving the start-up time), emergency neonatology surgery, listing specialists such as surgeons, trained or support staff for neonates, and a description of the capabilities for caesarean section and start-up time.

6) A description of the present plan for identification of high-risk maternity and neonatal patients and agreements for consultation with the Administrative Perinatal Center in cases of maternity and neonatal complications and neonates with handicapping conditions. This description shall include plans and agreements for providing:

   A) Management of acute surgical or cardiac difficulties;

   B) Genetic counseling if a genetically related condition is diagnosed in the neonate, or if a parent or a known carrier requests such services;

   C) Information, counseling and referral for parents of neonates with handicapping conditions or developmental disabilities to ensure informed consent for treatment;

   D) Counseling and referral services to assist these patients in obtaining habilitation and rehabilitation services;

   E) A description of the types of patients the hospital facility will care for and the types of patients it will refer to the Administrative Perinatal Center.

7) A description of the history and current level of involvement with CQI Continuous Quality Improvement activities as designed and implemented by the Administrative Perinatal Center.

8) All of the information required for hospital facility designation or redesignation to the Administrative Perinatal Center with which it is seeking affiliation.

b) The following procedures shall govern the review of perinatal hospitals applying for designation or redesignation:
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1) Hospitals applying for perinatal designation or redesignation shall provide all of the information contained in the Standardized Perinatal Site Visit Protocol (Appendix A) and the Resource Checklist (see Appendices L, M, N and O), and Outcome Oriented Data (Appendix B).

2) The completed written documentation shall be submitted to the Department three weeks in advance of the scheduled site visit, along with the site visit report, and the letter of agreement.

3) The Department will send the completed site visit documentation to the PAC members, no less than two weeks in advance of the PAC meeting, to facilitate PAC their review of the applicant hospital facility.

4) A representative of the Administrative Perinatal Center and representatives of the hospital for which the application is being considered shall be present at the PAC meeting to respond to questions or concerns of PAC members regarding the hospital's application for designation or redesignation. The representative may also be asked to present an oral summary of the applicant hospital's facility and the Administrative Perinatal Center's reasons for recommending/not recommending designation or redesignation to the PAC. A 12- to 18-month follow-up will be scheduled for any increase in designation to assess compliance with the new level of designation.

5) The Department will request that the Administrative Perinatal Center conduct a follow-up site visit to the hospital for review for designation or redesignation if the initial site visit is more than six months prior to submission to the PAC for review by PAC for designation or redesignation. Approval in such cases, approval shall be contingent upon receiving the findings of the follow-up site visit.

c) The following procedure shall be followed to change network affiliation for an individual hospital:

1) The hospital requesting a change in affiliation shall submit a written request to the Department. The existing Administrative Perinatal
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Center shall provide information for the site visit and review, as requested. The receiving Administrative Perinatal Center shall conduct the site visit in preparation for a change in network.

2) Representatives from the hospital and receiving Administrative Perinatal Center shall appear before the PAC and shall present appropriate documentation as described in Appendix A.

(Source: Amended at 34 Ill. Reg. _____, effective ____________)

Section 640.70 Minimum Components for Letters of Agreement Between Non-Birthing Center, Level I, Level II, Level II with Extended Neonatal Capabilities, or Level III Perinatal Hospitals and Their Administrative Perinatal Center

The following components, at a minimum, shall be addressed in a letter of agreement between the applicant hospital facility and its Administrative Perinatal Center:

a) A description of how maternal and neonatal patients with potential complications, including handicapping conditions or developmental disabilities, will be identified.

b) A description of the types of maternal and neonatal cases in which consultation from the Administrative Perinatal Center or Level III hospital facility shall be sought and from which patients shall be selected for transfer. This description shall address those high-risk mothers or neonates with:

1) Handicapping conditions, developmental disabilities, or medical conditions that are life threatening and require transport to a Perinatal Center or a Level III facility.

2) Handicapping conditions, developmental disabilities, or medical conditions that may require additional medical and surgical treatment and support services, but would not, however, require transport to an Administrative Perinatal Center or Level III hospital facility.

c) A description of how the Administrative Perinatal Center or Level III hospital facility will report a patient's progress to the referring physicians, and the criteria for return of the patient from the Administrative Perinatal Center or Level III hospital facility to an affiliated hospital facility closer to the
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A description of the methods for transporting high-risk mothers and neonates with physiological support in transit.

e) A description of the information, counseling and referral services available within the local community and the regional network for parents or potential parents of neonates with handicapping conditions or developmental disabilities.

f) A description of the professional educational outreach program for the regional network, including how efforts will be coordinated.

g) A provision requiring the establishment of a Joint Mortality and Morbidity Review Committee to review all perinatal deaths and selected morbidity. The review shall include the births of children born with handicapping conditions or developmental disabilities, utilizing criteria of case selection developed by the PAC to determine the appropriateness of diagnosis and treatment of neonates born with a handicapping condition or developmental disability and the adequacy of procedures to prevent such disabilities or the loss of life (Section 3(g) of the Act). This review shall also include a periodic comparison of total perinatal mortality and the relative numbers attributable to various categories of complications. Membership on the Committee should include pediatricians, obstetricians and representation from their designated Perinatal Center. Membership on the Committee may also include general family practitioners, with specified support staff of the hospital. A yearly synopsis of the Perinatal Network’s perinatal deaths will be prepared by the Network Administrator. This synopsis will include statistical information, as well as an identification of the factors contributing to deaths assigned a disposition of potentially avoidable. The synopsis will be shared with the Regional Quality Council. An action plan to address issues of preventability will be developed, for the Network, by the Regional Quality Council. The Regional Quality Council’s action plan will be forwarded to the State Wide Quality Council. The membership of the Regional Quality Council shall include representatives from all levels and disciplines of perinatal healthcare providers.

gh) A description of the regional perinatal network's program for medical and home nursing follow-up, describing systems of liaisons, with a letter of agreement from the agency providing the home nursing follow-up services.
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hi) A description of the methodologies used to monitor, evaluate, and improve the quality of health care services provided under the auspices of the applicant hospital facility, including a clear set of expectations of both the Administrative Perinatal Center and applicant hospital facility on joint participation in CQI continuous quality improvement activities.

ij) A requirement that the hospital shall provide stipulation requiring the provision of information, counseling and referral services to parents or potential parents of neonates with handicapping conditions or developmental disabilities upon the identification of the handicapping conditions and developmental disabilities to assist in obtaining habilitation, rehabilitation, and special education services.

jk) A requirement for evaluation and consultation with the Administrative Perinatal Center or Level III hospital facility and referral to the Administrative Perinatal Center or Level III hospital facility, when determined appropriate by the perinatal conditions or developmental disabilities, within 24 hours after the identification of the conditions (specific conditions shall be defined in the letter of agreement).

kl) A requirement that the hospital shall provide stipulation requiring the establishment of procedures for referral to appropriate state and local education service agencies of children having an identified handicapping condition or developmental disability requiring evaluation and assessment under such agencies shall be established. The procedures shall include a provision for obtaining parental consent prior to release of information to the appropriate state and local educational service agencies.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.80 Regional Perinatal Networks – Composition and Funding

a) Regional Perinatal Networks, as defined in Section 640.20, may include any number and combination of hospital-based maternity and newborn facilities functioning at one of the five levels of perinatal care according to policies and practices described in their letters of agreement. Where more than one Level III hospital facility provides services within a Regional Perinatal Network, a letter of agreement with the Administrative Perinatal Center shall describe how each will participate in the provision of services included in Section 640.40(e) of this Part. Regional Perinatal Networks such regional perinatal networks may also include other agencies, institutions and individuals.
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providing a complete range of perinatal health services, including preconceptional, prenatal, perinatal and family follow-up care services, as part of the regional network.

b) The Department will allocate funds for perinatal health services provided through Regional Perinatal Networks.

1) Sections 630.30 through 630.70 of the Department’s "Maternal and Child Health Services Code" (77 Ill. Adm. Code 630) describes categories of maternal and child health services project activity that are eligible for funding. Requirements for Maternal and Child Health (MCH) Project grant applications are included in 77 Ill. Adm. Code 630.80 through 630.200.

12) Funds available to the Department for funding of regional perinatal networks may be awarded to Regional Perinatal Networks under the following mechanisms:

A) The Department will provide grants to designated Administrative Perinatal Centers responsible for the administration and implementation of the Department's regionalized perinatal health care program. Under this option, the Administrative Perinatal Center is the applicant for Maternal and Child Health (MCH) Project funds and will apply as specified in the Department of Human Services’ Maternal and Child Health Services Code (77 Ill. Adm. Code 630.30 through 630.70).

B) The Department may provide grants to regional perinatal networks acting through a Regional Perinatal Management Group representing all participants in the regional network for systems management and perinatal services, including providers of preconceptional, prenatal, and family follow-up care, as well as providers of hospital-based perinatal care services. Under this option, the "Regional Perinatal Management Group" is the applicant for MCH Project funds and will apply as specified in 77 Ill. Adm. Code 630 and this Part.

Bc) Grant applications by regional perinatal networks may include services and responsibilities assigned to Administrative Perinatal
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Centers and Level III hospitals in Section 640.40(c) of this Part in addition to the perinatal care services included in 77 Ill. Adm. Code 630.30 through 630.70.

D) The Department may reimburse Perinatal Centers, providers of high-risk services at Level III facilities and health care agencies providing follow-up services where no local health department exists through contracts developed directly with these agencies, institutions and individuals for costs incurred in providing perinatal care services.

23) Preventive Services

A) A portion of funds available to the Department for funding regional perinatal networks shall be targeted for preventive services. These funds may be distributed or allocated to perinatal centers or regional perinatal networks according to a needs-based formula. The formula for determining the Preventive Services allocation is based upon the following need factors:

i) Number of live births by Regional Perinatal Network

ii) Fetal death rate by Regional Perinatal Network (Number of fetal deaths per 1,000 live births plus fetal deaths)

iii) Low birthweight rate by Regional Perinatal Network (Number of live births less than 2500 grams per 1,000 live births)

iv) Low or no prenatal care rate by Regional Perinatal Network (Number of live births to females receiving prenatal care during the third trimester or no care per 1,000 live births)

v) Number of hospitals in Regional Perinatal Network

B) The rates, based on occurrences at hospital of birth are calculated for each Regional Perinatal Network using vital statistics for the latest three years combined for which data is available. Total live
births for these years also are considered. The most current Regional Perinatal Network affiliation is used to aggregate the occurrences and determine the number of hospitals in each network.

C) The formula gives equal importance to each of the five need factors. Higher rates and absolute numbers indicate greater need. The values of each factor for each Regional Perinatal Network are standardized (Z-scores),* transformed into stanine scores,** and summed. The sum represents each Regional Perinatal Network's need indicator score. The indicator score is summed across all networks, and each network's relative proportion to that total is computed.

D) The resulting percentage for each Regional Perinatal Network is applied to the total Preventive Services funds available to determine the allocation for each Regional Perinatal Network.

E) * denotes Standardized Score (z-Score)

\[ z = \frac{X - \overline{X}}{s.d.} \]

Where \( z \) = The standardized score for a particular perinatal network on a particular need factor

\( X \) = The rate/number for a particular perinatal network on a particular need factor

\( \overline{X} \) = The mean for a particular need factor

s.d. = The standard deviation for a particular need indicator ** denotes Transformation of Z-scores to stanines.

Greater than + 1.75 = 9
+1.75 to + 1.5 = 8
+1.25 to + 0.75 = 7
+0.75 to + 0.25 = 6
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\[
\begin{align*}
+0.25 & \to - 0.75 = 5 \\
-0.25 & \to - 1.25 = 4 \\
-0.75 & \to - 1.75 = 3 \\
-1.25 & \to - 1.75 = 2 \\
less & \ than \ - 1.75 = 1
\end{align*}
\]

(Guilford and Fruchter Fundamental Statistics in Psychology and Education. New York: Mcgraw-Hill)

4) Requirements for Perinatal Centers and Level III facilities are included in Section 640.40(c) of this Part and include standards for medical eligibility for services.

(Source: Amended at 34 Ill. Reg. ______, effective ____________)

Section 640.90 State Perinatal Reporting System

a) Purpose
The Department will maintain a State Perinatal Reporting System to follow selected high-risk perinatal patients, to ensure that those patients are assessed at appropriate intervals, receive intervention as needed, and are referred for needed support services.

b) Identification and Referral of High-Risk Maternal Patients.

1) Each designated Administrative Perinatal Center and Level III hospital facility that which provides obstetrical care shall establish criteria and procedures for identifying high-risk pregnant and postpartum patients. A statement describing the such criteria and procedures shall be on file and shall be provided to the Department on request.

2) Each designated Perinatal Center and Level III facility shall prepare and distribute a Maternal Discharge Record (see Appendix C), to be provided by the Department, for each high-risk pregnancy or postpartum patient treated in the facility who requires public health nursing follow-up. If a patient is readmitted during the same or subsequent pregnancies and is deemed to be high-risk, another Maternal Discharge Record shall be prepared and distributed if public health nursing follow-up is needed.
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23) The hospital’s Perinatal Review Committee established pursuant to Section 640.70, or other committee established for the purpose of internal quality control or medical study for the purpose of reducing morbidity or mortality or improving patient care, shall collect and submit the required information required in subsection (b)(1) to the Department. These data will be considered confidential under Section 8-2101 of the Code of Civil Procedure [735 ILCS 5/8-2101].

4) The Maternal Discharge Record shall be completed and distributed within seven days after the patient’s discharge from the facility. Instructions for proper completion of the Maternal Discharge Record are contained in Appendix C. Additional pages may be attached when there is insufficient space on the form for all needed information.

5) Copies of the Maternal Discharge Record shall be distributed as follows:

A) The original form (white copy) of the Maternal Discharge Record shall be sent to the Department of Public Health, 535 West Jefferson, Springfield, Illinois 62761;

B) The yellow copy shall be sent to the Local Health Department or other local health agency designated by the Department to provide follow-up services in the county or area in which the patient resides;

C) The pink copy shall be retained by the reporting facility.

6) The hospital staff is encouraged to contact the designated local health agency by telephone when there is a need for additional information to be communicated to the local health nurse, or when a pre-discharge visit by the local health nurse is needed.

7) The Department will provide to the hospitals a list of Local Health Departments and other local health agencies designated to provide follow-up services to high-risk maternal patients. The list will be updated as needed, at least annually.

c) Identification of Perinatal Patients
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1) **All** hospitals licensed to provide obstetrical and newborn services shall report information on all perinatal patients. The Department requests, but does not require, reports on perinatal patients from hospitals outside Illinois, except (The Department does request reports from the St. Louis administrative perinatal centers or hospitals maintained by the Federal Government or other governmental agencies within the United States.)

2) Each hospital shall prepare a Perinatal Report record (see Appendix I) to be provided by the Department, for patients meeting one of the following conditions:

   A) Live-birth; or

   B) Diagnosed prior to discharge from newborn hospitalization as a perinatal or neonatal death.

3) **AGENCY NOTE:** Women who present with spontaneous abortion, ectopic pregnancy or mole are perinatal patients and shall be reported. In addition, the products of induced abortions shall not be reported to the State Perinatal Reporting System.

4) **AGENCY NOTE:** Fetal death (gestation greater than 20 weeks) is considered a reportable perinatal outcome and will be included in the State Perinatal Reporting System. However, fetal deaths do not have to be reported through the State Perinatal Reporting System, because these deaths are already reported and compiled in the Department’s Vital Records database.

53) Every hospital shall provide representatives of the Department with access to information from all medical, pathological, and other pertinent records and logs related to reportable registry information. The mode of access and the time during which this access will be provided shall be by mutual agreement between the hospital and the Department.

64) The State Perinatal Reporting System also will be complemented with information from the Department’s Vital Records live birth database under the Vital Records Act [410 ILCS 535], the Adverse Pregnancy Outcomes
DEPARTMENT OF PUBLIC HEALTH

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The Perinatal Reporting System consists of two forms of reporting. This reporting shall be on the forms provided by the Department or through electronic means that meets the exact specifications of the Department's data processing system. Complete perinatal reporting information shall must be reported to the Department within 14 days after infant discharge, regardless of the method of reporting.

The Perinatal Report record shall be distributed in the following manner:

A) Two copies of the Perinatal Reporting System record must be sent to the Department of Public Health's Office of Epidemiology and Health Systems Development, 605 West Jefferson, Springfield, Illinois 62761.

B) A pink copy may be retained by the reporting facility.

C) A copy must be forwarded to the Local Health Nurse.

D) A copy must be forwarded to the Primary Care Physician.

d) Report of Local Health Nurse

1) The Local Health Department or other designated local health agency providing follow-up services to high-risk infants shall prepare and distribute a Report of Local Health Nurse for each visit made; a Report shall also be distributed when a case is closed without a visit.

2) Copies of the Report of Local Health Nurse shall be distributed as follows:

A) The original form (white copy) of the Report of Local Health Nurse shall be sent to the Department of Public Health, 535 West Jefferson, Springfield, IL 62761.

B) The canary copy shall be sent to the hospital which referred the patient for follow-up services.
DEPARTMENT OF PUBLIC HEALTH

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C) The pink copy shall be retained at the appropriate Local Health Nurse Agency.

D) The goldenrod copy shall be sent to the patient's primary care physician.

3) The Local Health Department or other designated local health agency providing follow-up services to high-risk pregnant and postpartum women should send a copy of the progress notes to the referring hospital.

de) Availability of Information

1) The patient and hospital-facility-identifying information submitted to the Department or certified local health department agency under the Act and this Part shall be privileged and confidential and shall not be available for disclosure, inspection or copying under the Freedom of Information Act or the State Records Act, except as described in this Section. These data shall also be considered confidential under Section 8-2101 of the Code of Civil Procedure.

2) Aggregate summaries and reports of follow-up activities may be provided upon request to hospitals, to Administrative Perinatal Centers, and to the certified local health department agency designated by the Department to provide follow-up services to the patients. These reports may contain information provided by the referring hospital and information provided by the follow-up certified local health department agency. Patient or hospital-facility specific data provided to the appropriate designee under this Section are confidential and shall be handled in accordance with provisions of the Illinois Health Statistics Act [410 ILCS 520] and Section 9 of the Hospital Licensing Act [210 ILCS 85/9]. These data shall also be considered confidential under Section 8-2101 of the Code of Civil Procedure [735 ILCS 5/8-2101].

3) All reports issued by the Department in which the data are aggregated so that no patient or reporting hospital-facility may be identified shall be available to the public pursuant to the Department's Freedom of Information Code rules (2 Ill. Adm. Code 1126) and the Freedom of Information Act [5 ILCS 140].
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Quality Assurance and Continuous Quality Improvement

1) Reporting facilities (i.e., hospitals, certified local health departments, and managed care entities (MCEs), and designated local health agencies) shall be subject to review by the Department to assess the timeliness, correctness and completeness of the reports submitted by the hospital.

2) Reporting facilities (i.e., hospitals, certified local health departments, local health departments, and MCEs, managed care entities (MCE), and designated community health agencies) shall supply additional information to the Department at the Department's request when needed to confirm the accuracy of reports previously submitted, or to clarify information previously submitted. The Department will not request data that are more than two years old.

3) Monthly reports will be compiled by the Department, listing all hospital referrals to each health department/agency. The reports will be used for audits and assistance to health departments.

4) Managed Care Entities must submit their Quality Assurance Plan (QAP) to the Department for review and use in state-wide Quality Improvement in Perinatal program efforts.

(Source: Amended at 34 Ill. Reg. _____, effective ____________)

Section 640.100 High-Risk Follow-up Program (Repealed)

a) Local Health Nursing Follow-up for the High-Risk Mother

1) Purpose
Home visits to families of high-risk/pregnant and postpartum women have a two-fold purpose: assessment of the woman and the family/environment and facilitation of early intervention for identified problems.

2) Agencies to Provide Services
A) All Local Health Departments should provide follow-up services to
NOTICE OF PROPOSED AMENDMENTS

residents of their counties.

B) The Department may contract with a local health agency or county nurse to provide follow-up services to residents of areas without a Local Health Department.

3) Eligibility for Services
Any pregnant or postpartum patient identified as high-risk by a Level III hospital and referred to a Local Health Department or other designated local health agency should be offered follow-up services. The patient may decline such services.

4) Services to be Provided

A) Home visits to high-risk pregnant women should be scheduled as often as the client's condition warrants or as requested by the attending physician. A post-discharge visit should be made as soon as possible after discharge. Additional visits may be made during the postpartum period (i.e., 6 weeks following the date of delivery) for pregnancy-related conditions as indicated or as requested by the attending physician. If additional visits are for chronic health conditions (e.g., chronic hypertension, CVA, advanced cardiac disease), the patient should be referred to the licensed home health agency in the area for long-term follow-up.

B) Local health agencies which provide services must adhere to the provisions of the Maternal and Child Health Services Code (77 Ill. Adm. Code 630).

b) Local Health Nursing Follow-up for High-risk Infants

1) Purpose
The purpose of the infant follow-up program is to minimize disability in high-risk infants by identifying as early as possible conditions requiring further evaluation, diagnosis, and treatment and by assuring an environment that will promote optimal growth and development.

2) Agencies to Provide Services
DEPARTMENT OF PUBLIC HEALTH

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A) All Local Health Departments should provide follow-up services to residents of their counties.

B) The Department may contract with a local health agency to provide follow-up services to residents of areas without a Local Health Department.

3) Eligibility for Services
   Any infant eligible for the Adverse Pregnancy Outcomes Reporting System (APORS) and referred to a Local Health Department or other designated local health agency should be offered follow-up services. The family may decline such services.

4) Services to be Provided
   A) A minimum of 6 visits should be made by the follow-up nurse: as soon as possible after newborn hospital discharge, and at infant chronological ages 2, 6, 12, 18, and 24 months. Infants and their families having actual or potential health problems identified by the nurse should be visited more frequently for health monitoring, teaching, counseling and/or referral for appropriate services. Occasionally, when an infant is receiving services at the health department, a follow-up visit may be conducted by the nurse at that time.

   B) Follow-up services should include:
      i) Health History including: prenatal and natal history; parental concerns; family history of genetic disease or unexplained mental retardation; compliance with medical regimen, if any, including medications, treatments, and visits to the physician; infant care, including nutrition, elimination, and sleep activity; and family/infant interaction, family coping and parental knowledge of injury prevention.

      ii) Physical assessment, developmental assessment, and age specific anticipatory guidance based on the American College of Obstetricians and Gynecologists guidelines or
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current recommendations of the State that are found in subsection (b)(5) of this Section.

iii) Based on the results of the health history and physical assessment, the nurse will identify problems and nursing diagnoses and arrange for intervention. Intervention may include: counseling the family as to the importance of regular primary health care by the family physician, pediatrician, or clinic; encouraging scheduled return visits to Perinatal Center; family teaching/counseling by the follow-up nurse; referral to the physician or other screening, diagnostic or support services depending on the nature of the problem; and follow-up on referrals.

5) Local health agencies must adhere to the provisions of the Maternal and Child Health Services Code (77 Ill. Adm. Code 630) and the Department's High Risk Infant Tracking Supplement for Local Health Departments, which may be obtained from the Department's Office of Family Health.

(Source: Repealed at 34 Ill. Reg. _______, effective _____________)

Section 640. APPENDIX A  Standardized Perinatal Site Visit Protocol

Standardized Perinatal Site Visit Protocol

Components of site visit tool – information to be completed by applicant hospital prior to site visit and reviewed and approved at time of site visit by site visit team.

HOSPITAL: ____________________________ CITY: ____________________________, Illinois
Level of Designation Applied for:   Level I _____ Level II _____ Level II with Extended Neonatal Capabilities ____ Level III ____ Administrative Perinatal Center

ADMINISTRATIVE PERINATAL CENTER: _____________________________________________

DATE OF SITE VISIT: ____________________________

GEOGRAPHIC AREA SERVED (Provide description):

__________________________________________________________

__________________________________________________________

__________________________________________________________

MEMBERS (titles and affiliated institutions) OF SITE VISIT TEAM:

__________________________________________________________

__________________________________________________________

__________________________________________________________

I.  HOSPITAL DATA

Please use data from most recent three calendar years

A.  MATERNAL DATA

| | | | |
# NOTICE OF PROPOSED AMENDMENTS

## A. OBSTETRICAL DATA

<table>
<thead>
<tr>
<th>1. Number of Obstetrical Beds:</th>
<th></th>
<th>Current RN/Patient ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Ante-partum</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Labor / Delivery LDR</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C/Section Rooms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delivery Rooms (LDR)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Postpartum</td>
<td>(mother/baby couplets)</td>
<td></td>
</tr>
</tbody>
</table>

| 2. Total Number of Deliveries |   |                          |

| 3. Number of Vaginal Deliveries: |   |                          |
| Spontaneous                      |   |                          |
| Forceps                          |   |                          |
| Vacuum Extraction                |   |                          |

| 4. Number of C/Sections: |   |                          |
| Total                     |   |                          |
| Primary                   |   |                          |
| Repeat                    |   |                          |

| 5. Number of Vaginal Births After Cesarean |   |                          |
| 6. Number of inductions       |   |                          |
| 7. Number of augmentations    |   |                          |

## B. NEONATAL DATA

| 1. Number of nursery beds: |  | Current RN/Patient Ratio |
| Normal newborn             |   |                          |
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Intermediate/Special care</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NICU/Level III only</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. Average daily census in the SCN
3. Average daily census in the NICU

C. LIVE # BIRTH DATA

1. Birth Weight Specific Data – indicate # born & died in each category (example 10/2)
   (Use Electronic Birth Certificate data for live births)

<table>
<thead>
<tr>
<th>Birth Weight Range</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 500 grams</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>501 – 750</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>751 – 1000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1001 – 1250</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1251 – 1500</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1501 – 2000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2001 – 2500</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2501 – 3000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3001 – 3500</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3501 – 4000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4001 – 4500</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4501 – 5000</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5001 – PLUS</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Live Births/Neonatal Deaths

2. Incidence of Neonatal complications (Occurrences at hospital of birth)

<table>
<thead>
<tr>
<th>Condition</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Pulmonary air leaks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Necrotizing enterocolitis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retinopathy of prematurity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intraventricular hemorrhage – Grade III &amp; IV</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peri-ventricular leukomalacia</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Bronchopulmonary dysplasia</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Respiratory Distress Syndrome</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persistent Pulmonary Hypertension of the Newborn</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Meconium Aspiration Syndrome</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neonatal Surgeries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seizures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 minute Apgar &lt;5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

D. **FETAL DEATHS**

Birth weight Specific Data - # per weight category

<table>
<thead>
<tr>
<th>Birth weight category</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;500 grams</td>
<td></td>
<td></td>
</tr>
<tr>
<td>501 – 750</td>
<td></td>
<td></td>
</tr>
<tr>
<td>751 – 1000</td>
<td></td>
<td></td>
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<tr>
<td>1001 – 1250</td>
<td></td>
<td></td>
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<tr>
<td>1251 – 1500</td>
<td></td>
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<tr>
<td>1501 – 2000</td>
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<tr>
<td>2001 – 2500</td>
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<tr>
<td>2501 – 3000</td>
<td></td>
<td></td>
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<tr>
<td>3001 – 3500</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3501 – 4000</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4001 – 4500</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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| 4501 – 5000 |  
| Total Fetal Deaths |

### E. MORTALITY DATA

1. Maternal Deaths  
   (Hospital of Delivery)  

2. Perinatal Deaths  
   a. Fetal Deaths (complete attached chart FD)  
   b. Neonatal Deaths (complete attached chart ND)  

### F. TRANSPORT DATA

1. Number of maternal transfer/transports  
   (Do not include return transfers/transports)  
   a. Into institution  
   b. Out of institution  

2. Number of neonatal transfers  
   (Do not include return transfers/transports)  
   a. Into institution  
   b. Out of institution  

3. Provide maternal and neonatal transport information. Include previous calendar year and current year to date.

### II. RESOURCE REQUIREMENTS

Complete attached Resource Checklist for the appropriate level of care - current level and level being applied for if different.

### III. ADMINISTRATIVE PERINATAL CENTERS

A. Provide documentation of educational activities sponsored by the Administrative Perinatal Center for network hospitals and local health departments.
NOTICE OF PROPOSED AMENDMENTS

B. Provide evidence of morbidity and mortality reviews with network hospitals.

C. Provide written documentation of Regional Perinatal Network CQI Activities.

Components of site visit tool—information to be completed by applicant facility prior to site visit and reviewed and approved at time of site visit:

(By site visit team)
Initial/Date

I. PROGRAM DOCUMENTATION:

/ Updated maternity service plan with current staffing pattern appropriate for level of care.

/ Documentation of orientation program for nursing staff.

/ Documentation of ongoing continuing education program.

/ Documentation of Continuous Quality Improvement (CQI) Activities.

/ Updated, comprehensive procedure manual.

/ Appropriate resources checklist.

II. STAFF PERFORMANCE:

/ Chart review (site visit team).

/ Discussion of patient care with staff selected at random by the site visit team.

III. COMMENTS:

________________________________________________________________________

________________________________________________________________________
DEPARTMENT OF PUBLIC HEALTH

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<table>
<thead>
<tr>
<th>Director of Site Visit Team:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
</tr>
</tbody>
</table>

(Source: Amended at 34 Ill. Reg. _____, effective _________)
Section 640.APPENDIX B  Outcome Oriented Data: Perinatal Facility Designation/Redesignation *(Repealed)*

Section 640.EXHIBIT A  Outcome Oriented Data Form *(Repealed)*

<table>
<thead>
<tr>
<th>Level of Designation Applied for:</th>
<th>Level I</th>
<th>Level II</th>
<th>Level II (with extended capabilities)</th>
<th>Level III</th>
<th>Perinatal Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSPITAL:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CITY:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DESCRIPTION OF GEOGRAPHIC AREA SERVED:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PERINATAL CENTER:</th>
<th>DATE OF SITE VISIT:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>MEMBERS (titles and affiliated institution) OF SITE VISIT TEAM:</td>
<td></td>
</tr>
</tbody>
</table>

*Please use data from previous 3 calendar years: YEAR*  

**I. STATISTICS**

**A. Maternal Data**

<table>
<thead>
<tr>
<th>Number of obstetrical beds:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Antepartum</td>
</tr>
<tr>
<td>b. Labor / Delivery LDR / DRP</td>
</tr>
<tr>
<td>c. C/Section Rooms Delivery Rooms</td>
</tr>
<tr>
<td>e. Intensive Care Beds</td>
</tr>
</tbody>
</table>


<table>
<thead>
<tr>
<th>Notice of Proposed Amendments</th>
</tr>
</thead>
<tbody>
<tr>
<td>d. Postpartum:</td>
</tr>
<tr>
<td>2. Total number of deliveries:</td>
</tr>
<tr>
<td>3. Percent of vaginal deliveries:</td>
</tr>
<tr>
<td>Spontaneous:</td>
</tr>
<tr>
<td>Forceps:</td>
</tr>
<tr>
<td>Vacuum Extraction:</td>
</tr>
<tr>
<td>4. Percent of C/Sections:</td>
</tr>
<tr>
<td>% Primary:</td>
</tr>
<tr>
<td>% Repeat:</td>
</tr>
<tr>
<td>5. Number of VBACs:</td>
</tr>
<tr>
<td>Attempts:</td>
</tr>
<tr>
<td>Successes:</td>
</tr>
<tr>
<td>6. Percent of inductions:</td>
</tr>
<tr>
<td>7. Percent of augmentations:</td>
</tr>
<tr>
<td>8. Outcomes for Maternal Admissions with the following diagnosis:</td>
</tr>
<tr>
<td><strong>Diabetes</strong></td>
</tr>
<tr>
<td># of maternal admission</td>
</tr>
<tr>
<td># transferred out for delivery</td>
</tr>
<tr>
<td># discharged undelivered</td>
</tr>
<tr>
<td># of neonatal deaths</td>
</tr>
<tr>
<td># of fetal deaths</td>
</tr>
<tr>
<td># of neonates transferred to a higher level facility</td>
</tr>
<tr>
<td><strong>Chronic Hypertension</strong></td>
</tr>
<tr>
<td># of maternal admissions</td>
</tr>
<tr>
<td># transferred out for delivery</td>
</tr>
<tr>
<td># discharged undelivered</td>
</tr>
<tr>
<td># of neonatal deaths</td>
</tr>
<tr>
<td># of fetal deaths</td>
</tr>
<tr>
<td># of neonates transferred to a</td>
</tr>
</tbody>
</table>
DEPARTMENT OF PUBLIC HEALTH

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higher level facility

|   |   |   |

B. Neonatal Data

|   |   |   |

1. Number of nursery beds:

|   |   |   |

   Normal Newborn

   Intermediate / Special care

   NICU / Level III

   Average daily census in the Special Care Nursery

   (Level II or II with extended capabilities or Level III intermediate)

   Average daily census in the NICU (Level III)

   |   |   |

C. Fetal Mortality

1. Birthweight Specific Data:

   |   |   |

   <500 grams

   501-750

   751-1000

   1001-1250

   1251-1500

   1501-2000

   2001-2500

   2501-3000

   3001-3500

   3501-4000
DEPARTMENT OF PUBLIC HEALTH

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2. **Live-Birth Data:**

<table>
<thead>
<tr>
<th>Weight Range</th>
<th>Number of Infants Born</th>
<th>Number of Infants Ventilated Beyond Six Hours</th>
<th>Number of Ventilated Infants Survived</th>
<th>Ventilator Days (Total)</th>
<th>Oxygen Days (Total)</th>
<th>Length of Stay (Days)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>&lt;500 grams</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;500 grams</td>
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<tr>
<td>&lt;500 grams</td>
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<tr>
<td>&lt;500 grams</td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>501–750 grams</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>501–750 grams</td>
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<tr>
<td>501–750 grams</td>
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<td>501–750 grams</td>
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<tr>
<td><strong>751–1000 grams</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>751–1000 grams</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>751–1000 grams</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>751–1000 grams</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>1001–1250 grams</strong></td>
<td></td>
<td></td>
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<tr>
<td>1001–1250 grams</td>
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</tr>
<tr>
<td>1001–1250 grams</td>
<td></td>
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</tr>
<tr>
<td>1001–1250 grams</td>
<td></td>
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</tr>
</tbody>
</table>
## DEPARTMENT OF PUBLIC HEALTH

### NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Weight Range</th>
<th>Number of Infants Born</th>
<th>Number of Infants Ventilated Beyond Six Hours</th>
<th>Number of Ventilated Infants Survived</th>
<th>Ventilator Days (Total)</th>
<th>Oxygen Days (Total)</th>
<th>Length of Stay (Days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2501–3000 grams</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2001–2500 grams</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1501–2000 grams</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>1251–1500 grams</td>
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</table>
## DEPARTMENT OF PUBLIC HEALTH

### NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Weight Range</th>
<th>Number of Infants Born</th>
<th>Number of Infants Ventilated Beyond Six Hours</th>
<th>Number of Ventilated Infants Survived</th>
<th>Ventilator Days (Total)</th>
<th>Oxygen Days (Total)</th>
<th>Length of Stay (Days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3001–3500 grams:</td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>3501–4000 grams:</td>
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<tr>
<td>4001–4500 grams:</td>
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<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>4501–5000 grams:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5001 PLUS:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Number of Infants Born**

**Number of Infants Ventilated Beyond Six Hours**

**Number of Ventilated Infants Survived**

**Ventilator Days (Total)**

**Oxygen Days (Total)**

**Length of Stay (Days)**
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Number of ventilated infants survived</th>
<th>_______</th>
<th>_______</th>
<th>_______</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ventilator days (total)</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Oxygen days (total)</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Length of stay (days)</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
</tbody>
</table>

Incidence of Neonatal Complications:

<table>
<thead>
<tr>
<th>Pulmonary air leaks</th>
<th>_______</th>
<th>_______</th>
<th>_______</th>
</tr>
</thead>
<tbody>
<tr>
<td>Necrotizing enterocolitis</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Retinopathy of Prematurity</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Intraventricular hemorrhage</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Grade I &amp; II</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Grade III &amp; IV</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Periventricular leukomalacia</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Bronchopulmonary dysplasia</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Neonatal Sepsis</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Respiratory Distress Syndrome</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Persistent Pulmonary</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Hypertension of the Newborn</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Meconium Aspiration Syndrome</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Neonatal Surgeries</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>Seizures</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
<tr>
<td>5-minute Apgar &lt; 7</td>
<td>_______</td>
<td>_______</td>
<td>_______</td>
</tr>
</tbody>
</table>

D. OUTCOME STATISTICS

All neonatal deaths are to be counted by the hospital of birth regardless of place of death. Neonates born in emergency rooms are to be counted by the hospital of birth.

1. Maternal Deaths:
   (Attach documentation of joint case review meeting and assigned disposition of mortality for each death.)
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

(Standardized Neonatal Mortality Rate and Standardized Perinatal Mortality Rate. This information should be obtained from the most current Perinatal Health Status Reports.)

2. Standardized Neonatal Mortality Rate: _______ _______ _______

3. Standardized Perinatal Mortality Rate: _______ _______ _______

(Attach documentation of joint case review meetings and assigned disposition of the mortalities. Give synopsis of action taken on deaths disposed as potentially avoidable.)

II. STAFF

A. List the names and titles of directors/chairperson:

Attach CV of Medical Directors; where appropriate identify subspecialty board).

<table>
<thead>
<tr>
<th>Full Time Board Certified</th>
<th>Sub-board Certified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maternal—Fetal</td>
<td>Y/N</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Neonatology</td>
<td>Y/N</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Obstetric</td>
<td>Y/N</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>FP/GP</td>
<td>Y/N</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Anesthesia</td>
<td>Y/N</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Obstetric-Anesthesia</td>
<td>Y/N</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Program</th>
<th>DEC</th>
<th>IND</th>
<th>NEC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pediatric</td>
<td>Y/N</td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>OB/Gyn Residency Program (if applicable)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatric Residency Program (if applicable)</td>
<td>Y/N</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Perinatal Fellowship Program</td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>Neonatal Fellowship program</td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>Pediatric Surgery</td>
<td>Y/N</td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
<tr>
<td>Pediatric Neurosurgery</td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>Pediatric Radiology</td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>Pediatric Cardiology</td>
<td>Y/N</td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
<tr>
<td>Pediatric Cardiac Surgery</td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>Pediatric Anesthesiology</td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td>Pediatric Ophthalmology</td>
<td></td>
<td>Y/N</td>
<td></td>
</tr>
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</table>
**NOTICE OF PROPOSED AMENDMENTS**

<table>
<thead>
<tr>
<th>Specialty</th>
<th>On-Call</th>
<th>In-House 24 hours/day</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pediatric Nephrology</strong></td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
<tr>
<td><strong>Pediatric Medical Genetics</strong></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td><strong>Pediatric Orthopedics</strong></td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
<tr>
<td><strong>Pediatric Otolaryngology</strong></td>
<td>Y/N</td>
<td></td>
</tr>
<tr>
<td><strong>Pediatric Pulmonology</strong></td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
<tr>
<td><strong>Pediatric Hematology</strong></td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
<tr>
<td><strong>Pediatric Endocrinology</strong></td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
<tr>
<td><strong>Pediatric Gastroenterology</strong></td>
<td>Y/N</td>
<td>Y/N</td>
</tr>
</tbody>
</table>

**B. Staff Available**

<table>
<thead>
<tr>
<th>Specialty</th>
<th>On-Call</th>
<th>In-House 24 hours/day</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obstetrics</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neonatology</td>
<td></td>
<td></td>
</tr>
<tr>
<td>OB-Anesthesia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal / Fetal</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
C. Nursing

(List the names, titles, and credentials of nursing staff, as required for this section, with privileges in the Departments of Obstetrics and Pediatrics. Attach CB of Director of Nursing.)

Director of Nursing (Maternal / Child Nursing)

Director of Nursing (NICU / NBN)

Certified Nurse-Midwife / Midwives

Clinical Specialist/Nurse Practitioners—Neonatal and Obstetrics

Transport Coordinators

<table>
<thead>
<tr>
<th></th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neonatal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maternal / Fetal</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Allied Health Staff

<table>
<thead>
<tr>
<th></th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Radiology-Director</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genetics-Director</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respiratory-Therapy-Director</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Licensed Social Worker</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registered Dietitian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director of Laboratory</td>
<td></td>
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</tr>
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</table>
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Family Care Coordinator</th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dedicated Pharmacist</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

D. Transport Statistics

| YEARS | __________ | __________ | __________ |

1. Number of maternal transfers/transport do not include return transfers/transport:
   - into institution __________ __________ __________
   - out of institution __________ __________ __________
   - in Network __________ __________ __________
   - out of Network __________ __________ __________

2. Number of neonatal transfers (do not include return transfers):
   - into institution __________ __________ __________
   - out of institution __________ __________
   - in Network __________
   - out of Network __________ __________

3. Number of in-born infants less than 1,250 grams transferred out (state disposition of above infants not transferred):

E. Transfer Information (Please attach the information requested in this section):

1. Maternal:
   a. List conditions for which maternal patients were transferred (latest year only):
   b. List hospitals to which maternal patients were transferred (latest year only):
DEPARTMENT OF PUBLIC HEALTH

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only):

c. Number of maternal transfer patients refused and reasons for refusal:

2. Neonatal:

a. List conditions for which neonates were transferred (latest year only):

b. List hospitals to which neonates were transferred (latest year only):

c. Number of neonatal transfer patients refused and reasons for refusal (latest year only):

F. Anesthesia

1. Is 24-hour anesthesia available in-house?  Y  N

If yes, who (anesthesiologist, nurse anesthetist) ____________________________

If anesthesia is on-call, response time? ____________________________

2. Location C/Section performed

in OR suite on obstetrical level

in OR suite on surgery level

3. Length of time required for start-up of C/Section ____________________________

G. Education

1. Documentation of in-service education programming provided:  Y  N

Brief description, dates, and attendance:

2. Documentation of fetal monitoring and neonatal resuscitation programs provided. Brief description, dates, and attendance:

3. Documentation of C/Section Reviews:

H. Developmental Follow-up Program
DEPARTMENT OF PUBLIC HEALTH

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Briefly describe your developmental follow-up program, and include the name of the Director of this program and the length of follow-up.

Explain arrangements for integrating Early Intervention Programs with the discharge-planning process and developmental follow-up program.

I. Continuous Quality Improvement (CQI)

   Briefly describe CQI Activities specific to Maternal/Fetal/Neonatal Medicine.

J. Perinatal Centers

   1. Provide documentation of educational activities sponsored by the Center for Network hospital and community health agencies.

   2. Provide documentation of morbidity and mortality reviews with Network hospitals.

   3. Provide documentation of Network Continuous Quality Improvement (CQI) activities.

(Source: Repealed at 34 Ill. Reg. ______, effective ____________)
Section 640.APPENDIX B  Outcome Oriented Data: Perinatal Facility Designation/Redesignation (Repealed)

Section 640.EXHIBIT B  Data Collection Exception Form (Repealed)

Sample Data Collection Form for Hospitals Serving "Exception" Cases

Both maternal and neonatal data should be supplied for either a maternal or neonatal exception. However, if a maternal exception is transported to another hospital for delivery, the data relevant to the neonate will not be provided by the referring hospital.

<table>
<thead>
<tr>
<th>Cases</th>
<th>Maternal Data</th>
<th>Neonatal Admitting Date</th>
<th>Neonatal Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name and Record #</td>
<td>Birth</td>
<td>Disposal</td>
</tr>
<tr>
<td>Baby</td>
<td>Date Time</td>
<td>GA__Weight__</td>
<td></td>
</tr>
<tr>
<td>Mother</td>
<td>Transport? Date Time To Where?</td>
<td>Admitting Dx:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Date Time</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transport?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Date Time</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To Where?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Weight</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Admitting Dx:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Name:</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Date Time</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transport?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Date Time</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To Where?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Disposal</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>H &amp; H</td>
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</tbody>
</table>

(Source: Repealed at 34 Ill. Reg. ______, effective ____________)
IL\LLINOIS REGISTER

DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Section 640.APPENDIX C  Maternal Discharge Record (Repealed)

Section 640.EXHIBIT A  Maternal Discharge Record Form (Repealed)
## DEPARTMENT OF PUBLIC HEALTH

### NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>PHYSICIAN PROVIDING FOLLOW-UP CARE* (INC. ADDRESS &amp; PHONE #)</th>
<th>HOSPITAL NURSE CONTACT</th>
<th>TELEPHONE</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>REFEREE TO COMMUNITY SERVICES</th>
<th>YES TO</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>WIC</td>
<td>HOME HEALTH</td>
<td>SOCIAL SERVICE AGENCY</td>
</tr>
<tr>
<td>MENTAL HEALTH</td>
<td>DCS</td>
<td>OTHER (PLEASE SPECIFY)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTACT PERSON’S NAME</th>
<th>RELATIONSHIP TO PATIENT</th>
<th>TELEPHONE NUMBER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET ADDRESS</td>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2ND CONTACT PERSON’S NAME</th>
<th>RELATIONSHIP TO PATIENT</th>
<th>TELEPHONE NUMBER*</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET ADDRESS</td>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PATIENT INFORMED OF PUBLIC HEALTH NURSE VISIT?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>PUBLIC HEALTH NURSE AGENCY NAME</td>
<td>CODE</td>
<td>ADDRESS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SEND ORIGINALS:</th>
<th>DEPARTMENT OF PUBLIC HEALTH</th>
<th>SIGNATURE*</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPRINGFIELD, IL 62761</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COPIES:</th>
<th>YELLOW – LOCAL HEALTH NURSE</th>
<th>PINK – FACILITY</th>
<th>DATE*</th>
</tr>
</thead>
<tbody>
<tr>
<td>IL444-4210 (N-10-08)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Source: Repealed at 34 Ill. Reg. _______, effective _____________)}
<table>
<thead>
<tr>
<th>Section 640.APPENDIX C  Maternal Discharge Record <em>(Repealed)</em></th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 640.EXHIBIT B  Instructions forCompleting Maternal Discharge Record <em>(Repealed)</em></td>
</tr>
</tbody>
</table>

The following Section describes the data elements to complete the Maternal Discharge Record.

| Medicaid Recipient Number: | Enter client’s existing Medicaid recipient number. |
| Medicaid Pending: | Check box (yes) if Medicaid has been applied for and is pending. |
| Social Security Number: | Enter client’s social security number. |
| Referring Hospital Name and City: | Enter the name and city of the discharging hospital. |
| Hospital Code: | Enter the code of the referring hospital. |
| Medical Record Number: | Enter the patient number used by your hospital which number is unique to this patient. This number is usually assigned by the business office. |
| Cornerstone Number: | IDPH/Local Health Agency use. |
| Date of Admission: | Enter the date the patient was admitted to the hospital. |
| Race: | Check the appropriate box. If a patient does not consider herself as belonging to any of the three racial groups, type or write the preferred designation alongside “Race.” |
### DEPARTMENT OF PUBLIC HEALTH

**NOTICE OF PROPOSED AMENDMENTS**

<table>
<thead>
<tr>
<th><strong>Hispanic:</strong></th>
<th>Check the appropriate box. Indicate “Hispanic” if the patient identifies herself with that ethnic group.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>NOTE: Mark both “Race” and “Hispanic” for all Hispanic patients. Hispanic persons may belong to any race.</td>
</tr>
<tr>
<td><strong>County of Residence:</strong></td>
<td>Print the name of the county in which the patient resides.</td>
</tr>
<tr>
<td><strong>County Code:</strong></td>
<td>Enter the county code, if known.</td>
</tr>
<tr>
<td><strong>Patient’s Last Name,</strong> <strong>First Name,</strong> <strong>M.I.:</strong></td>
<td>Print the name of the patient.</td>
</tr>
<tr>
<td><strong>Date of Birth:</strong></td>
<td>Enter the birth date of the patient.</td>
</tr>
<tr>
<td><strong>Husband’s Last Name,</strong> <strong>First Name:</strong></td>
<td>Print the name of the patient’s husband if she is married.</td>
</tr>
<tr>
<td><strong>Patient’s Maiden Name:</strong></td>
<td>Print the maiden name of the patient. Enter the maiden name even when it is identical with the last name.</td>
</tr>
<tr>
<td><strong>Marital Status:</strong></td>
<td>Check the appropriate box.</td>
</tr>
<tr>
<td><strong>Patient’s Telephone Number:</strong></td>
<td>Enter the Patient’s home telephone number, including area code.</td>
</tr>
<tr>
<td><strong>Patient’s Street Address:</strong></td>
<td>Enter apartment number, if any, house number, street, city, state and zip code of the patient.</td>
</tr>
<tr>
<td><strong>Gravida:</strong></td>
<td>Enter the total number of pregnancies, including the present pregnancy.</td>
</tr>
</tbody>
</table>
**DEPARTMENT OF PUBLIC HEALTH**

**NOTICE OF PROPOSED AMENDMENTS**

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Para:</td>
<td>F: Number of full-term births</td>
</tr>
<tr>
<td></td>
<td>P: Number of premature births</td>
</tr>
<tr>
<td></td>
<td>A: Number of abortions, spontaneous and induced</td>
</tr>
<tr>
<td></td>
<td>L: Number of living children</td>
</tr>
<tr>
<td>Blood Type:</td>
<td>Enter the blood group (O, A, B, or AB) and the RH type (positive or negative).</td>
</tr>
<tr>
<td>HbsAG Status:</td>
<td>Indicate positive or negative for hepatitis B surface antigen. When positive,</td>
</tr>
<tr>
<td></td>
<td>or reactive, indicates HBV infected at the present time with the ability to</td>
</tr>
<tr>
<td></td>
<td>pass the disease to other people.</td>
</tr>
<tr>
<td>EDC:</td>
<td>Enter the estimated month, day, and year of confinement.</td>
</tr>
<tr>
<td>Prenatal Care Began:</td>
<td>Enter the number of completed weeks of gestation at which the patient began</td>
</tr>
<tr>
<td></td>
<td>prenatal care. If prenatal records are not available, enter the estimated</td>
</tr>
<tr>
<td></td>
<td>weeks of gestation based on patient recall.</td>
</tr>
<tr>
<td>Prenatal Visits:</td>
<td>Enter the total number of prenatal visits the patient had.</td>
</tr>
<tr>
<td>Reproductive History:</td>
<td>Check the box or boxes for all items that apply.</td>
</tr>
<tr>
<td>Reasons for Referral:</td>
<td>Check the box or boxes for all items that apply.</td>
</tr>
<tr>
<td>Discharge Date:</td>
<td>Enter the month, day, and year the patient was discharged from the hospital.</td>
</tr>
<tr>
<td>Blood Pressure:</td>
<td>Enter the blood pressure of the patient at discharge.</td>
</tr>
</tbody>
</table>
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Height: Enter the height in feet and inches of the patient.

Weight: Enter the weight in pounds of the patient at discharge.

Family Planning: Check the appropriate box.

Patient Delivered During This Admission: Check the appropriate box.

Type and Date of Delivery: If the patient delivered during this admission, indicate the date of delivery and whether the delivery was a vaginal delivery, cesarean section, or other, i.e., ectopic, hydatidiform mole.

Was Infant High Risk: If the patient delivered during this admission, indicate whether the infant required care other than normal newborn.

Infant’s Condition: If the patient delivered during this admission, indicate the infant’s sex, birth weight and APGAR scores.

Major Treatment During Hospitalization: List all major medical and/or surgical treatments that the patient underwent while hospitalized (i.e., C-Section, mechanical ventilation, etc.).

Discharge Treatments/ Diagnosis/Medications: Briefly describe any treatments and medications (i.e., prescriptions, diet, restricted activity) prescribed for the patient at discharge.

Other Concerns: Enter any additional information that may assist the local health nurse in providing appropriate follow-up services to this patient.
<table>
<thead>
<tr>
<th><strong>Physician Providing Follow-up Care:</strong></th>
<th>Physician providing follow-up care to mother, include address and telephone number.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Hospital Nurse Contact:</strong></td>
<td>Enter name and telephone number of hospital nurse who can answer questions, if necessary.</td>
</tr>
<tr>
<td><strong>Referral to Community Services:</strong></td>
<td>If the patient has been referred to any community service agency, check appropriate box(es).</td>
</tr>
<tr>
<td><strong>Contact Person’s Name:</strong></td>
<td>Print the name of a friend, relative or other person with a stable address who would know how to get in touch with the patient.</td>
</tr>
<tr>
<td><strong>Relationship:</strong></td>
<td>Describe the relationship (friend, mother, pastor, etc.) of the contact person to the patient.</td>
</tr>
<tr>
<td><strong>Telephone Number:</strong></td>
<td>Enter the telephone number of the contact person.</td>
</tr>
<tr>
<td><strong>Street Address, City, Zip Code:</strong></td>
<td>List the complete address of the contact person.</td>
</tr>
<tr>
<td><strong>Second Contact Person, Relationship and Telephone Number:</strong></td>
<td>Print name of another contact person who lives at a different address than above. Include name, relationship, and telephone number.</td>
</tr>
<tr>
<td><strong>Patient Informed of LHN Visit:</strong></td>
<td>If the patient has been informed that a local public health nurse will visit her home, check the “Yes” box, otherwise check the “No” box.</td>
</tr>
</tbody>
</table>
**NOTICE OF PROPOSED AMENDMENTS**

<table>
<thead>
<tr>
<th>Local Health Nurse Agency Name:</th>
<th>Enter the name of the local health nurse agency to which the patient was referred for follow-up services. The Department will provide a list of the agencies and the areas they serve.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Health Nurse Agency Code:</td>
<td>Enter code.</td>
</tr>
<tr>
<td>Street Address, City, Zip Code:</td>
<td>Complete address of LHN agency.</td>
</tr>
<tr>
<td>Signature:</td>
<td>The person completing the medical information should sign the form.</td>
</tr>
<tr>
<td>Date:</td>
<td>Enter date the form is completed.</td>
</tr>
</tbody>
</table>

(Source: Repealed at 34 Ill. Reg. ______, effective ____________ )
### Section 640. APPENDIX F  Report of Local Health Nurse, Infant  *(Repealed)*

### Section 640. EXHIBIT A  Local Health Nurse, Infant Form  *(Repealed)*

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant, Last-Name</td>
<td>Infant, First-Name</td>
</tr>
<tr>
<td>Sex</td>
<td>Birth date</td>
</tr>
<tr>
<td>M / F / U</td>
<td>/ /</td>
</tr>
<tr>
<td>Patient I.D.-#</td>
<td>Infant Classification</td>
</tr>
<tr>
<td></td>
<td>☐ APORS ☐ Genetics ☐ Both</td>
</tr>
<tr>
<td>Street Address</td>
<td>Apt.-No.</td>
</tr>
<tr>
<td></td>
<td>City</td>
</tr>
<tr>
<td></td>
<td>Zip Code</td>
</tr>
<tr>
<td>Local Health Agency</td>
<td>Agency Code</td>
</tr>
<tr>
<td>Hospital of Delivery</td>
<td>Reporting Hospital</td>
</tr>
<tr>
<td></td>
<td>Reporting Hospital Code</td>
</tr>
<tr>
<td>Chronological Age</td>
<td>Corrected Age</td>
</tr>
<tr>
<td>☐ wk.</td>
<td>☐ mo.</td>
</tr>
<tr>
<td>☐ wk.</td>
<td>☐ mo.</td>
</tr>
<tr>
<td>Mother, Last-Name</td>
<td>Mother, First-Name</td>
</tr>
<tr>
<td></td>
<td>Mother, Maiden-Name</td>
</tr>
<tr>
<td>Date of Visit</td>
<td>Visit No.</td>
</tr>
<tr>
<td>☐ 0</td>
<td>☐ 1</td>
</tr>
<tr>
<td>☐ 2</td>
<td>☐ 3</td>
</tr>
<tr>
<td>☐ 4</td>
<td>☐ 5</td>
</tr>
<tr>
<td>☐ 6</td>
<td>☐ 7</td>
</tr>
<tr>
<td>☐ 8</td>
<td>☐ 9</td>
</tr>
<tr>
<td>☐ 10</td>
<td></td>
</tr>
<tr>
<td>Date Case Closed</td>
<td>Case Closed</td>
</tr>
<tr>
<td>☐ With Visit</td>
<td>☐ Without Visit</td>
</tr>
<tr>
<td>Reason for Closure</td>
<td>1. Completed Program</td>
</tr>
<tr>
<td>(Circle One)</td>
<td>2. Infant Died</td>
</tr>
<tr>
<td></td>
<td>3. Unable to Locate</td>
</tr>
<tr>
<td></td>
<td>4. Refused Visit</td>
</tr>
<tr>
<td></td>
<td>5. Services No Longer Needed</td>
</tr>
<tr>
<td></td>
<td>6. Moved</td>
</tr>
<tr>
<td></td>
<td>7. Other</td>
</tr>
<tr>
<td>Discharge/Diagnoses/Additional: <em>(Please Print)</em></td>
<td>ICD-9 Code</td>
</tr>
<tr>
<td></td>
<td>(for IDPH use only)</td>
</tr>
<tr>
<td></td>
<td>Drug Toxicity</td>
</tr>
<tr>
<td></td>
<td>If yes, check all that apply:</td>
</tr>
<tr>
<td>☐ 0 Opioid</td>
<td>☐ 4 Mixed</td>
</tr>
<tr>
<td>☐ 1 Barbiturate</td>
<td>☐ 5 Not stated</td>
</tr>
<tr>
<td>☐ 2 Cocaine</td>
<td>☐ 6 Other:</td>
</tr>
<tr>
<td>☐ 3 Cannabis</td>
<td></td>
</tr>
<tr>
<td>☐ Newborn Screening</td>
<td>☐ Genetic Screening</td>
</tr>
<tr>
<td>☐ Genetic Counseling</td>
<td>☐ Physical Assessment</td>
</tr>
</tbody>
</table>

**Additional Data**

- Height _____ ins.  Weight _____ lbs. _____ oz.  Head Circumference _____ cms.  Denver II: ☐ Normal  ☐ Suspect  ☐ Untestable
- Hearing: ☐ Normal  ☐ Suspect  ☐ Impaired  ☐ In Treatment
- Vision: ☐ Normal  ☐ Suspect  ☐ Impaired  ☐ Corrected With Surgery  ☐ Corrected With Lens  ☐ Legally Blind
- Support Service Referrals (check all that apply): ☐ Audiology testing  ☐ Genetic counseling/diagnosis  ☐ Social services
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Department of Children and Family Services (DCFS)</th>
<th>Home health</th>
<th>Support group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developmental testing</td>
<td>Nutritional services</td>
<td>WIC/nutrition</td>
</tr>
<tr>
<td>Division of Specialized Care for Children</td>
<td>Occupational therapy</td>
<td>Other__________</td>
</tr>
<tr>
<td>Early Intervention</td>
<td>Physical therapy</td>
<td>__________________</td>
</tr>
</tbody>
</table>

Send original to Illinois Department of Human Services, Office of Family Health, 535 W. Jefferson St., Springfield, Illinois

Signature of Nurse completing this form

Canary—Reporting Hospital
Pink—Local Health Agency
Goldenrod—Primary Care Physician

(Source: Repealed at 34 Ill. Reg. ______, effective _______________)

Section 640. APPENDIX F Report of Local Health Nurse, Infant (Repealed)

Section 640. EXHIBIT B Instructions for Completing the Report of Local Health Nurse, Infant (Repealed)

INSTRUCTIONS FOR COMPLETION OF INFANT REPORT OF LOCAL HEALTH NURSE

Please Note: This form is only for statistical/tracking information for Illinois Department of Public Health (IDPH). The Cornerstone Physical Assessment—Child and Denver II will be the assessment tools.

Infant's last name: Last name of infant.

Infant's first name: First name of infant.

Sex: male/female/unknown Unknown indicates sexual ambiguity

Birth Date: Infant's date of birth.

Cornerstone ID #: Number assigned to infant by Cornerstone

Patient ID number: The patient number given by the hospital to each infant which number is unique to each admission. Found on the Infant Discharge Record (IDR).

Infant Classification:

APORS: Check box if infant discharge record (APORS) received from hospital.

Genetics: Check box if referred to genetics/for genetics services.

Both: Check box if both APORS and Genetics.

Street address, apartment, city, zip code: Address of infant: house number, street, apartment, city, zip code.
**DEPARTMENT OF PUBLIC HEALTH**

**NOTICE OF PROPOSED AMENDMENTS**

<table>
<thead>
<tr>
<th>Local health agency:</th>
<th>Name of health department or agency responsible for providing high risk follow-up.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agency code:</td>
<td>IDPH code number of health department or agency responsible for providing high risk follow-up.</td>
</tr>
<tr>
<td>Hospital of delivery:</td>
<td>Hospital of infant's birth. Reporting hospital: Hospital providing the highest level of care and responsible for completing Infant Discharge Record.</td>
</tr>
<tr>
<td>Reporting hospital code:</td>
<td>IDPH code number of reporting hospital.</td>
</tr>
<tr>
<td>Chronological age:</td>
<td>Age of infant in weeks (during the first year of life) then in months, calculated from date of birth.</td>
</tr>
<tr>
<td>Corrected age:</td>
<td>Age of infant in weeks based on gestational age at birth (see IDR). To determine corrected age at time of visit, subtract the gestational age from 40 weeks, then subtract this difference from the chronological age (weeks) at the time of the visit.</td>
</tr>
<tr>
<td>Mother, last name:</td>
<td>Last name of mother.</td>
</tr>
<tr>
<td>Mother, first name:</td>
<td>First name of mother.</td>
</tr>
<tr>
<td>Mother, maiden name:</td>
<td>Maiden name of mother.</td>
</tr>
<tr>
<td>Date of visit:</td>
<td>Date of visit to family by Local Health Nurse.</td>
</tr>
<tr>
<td>Visit number:</td>
<td>Number of times infant has been seen by Local Health Nurse.</td>
</tr>
<tr>
<td>Date case closed:</td>
<td>Enter date the Local Health Nurse closed the case for follow-up.</td>
</tr>
<tr>
<td>Case closed with visit:</td>
<td>Home visit made at closure.</td>
</tr>
<tr>
<td>without visit:</td>
<td>Closed without a home visit.</td>
</tr>
</tbody>
</table>
# NOTICE OF PROPOSED AMENDMENTS

<table>
<thead>
<tr>
<th>Reason for closure:</th>
<th>Circle appropriate reason case closed for all infants closed with and without visit.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed program:</td>
<td>Infant received 6 visits or more during the first 24 months of life.</td>
</tr>
<tr>
<td>Infant died:</td>
<td>Infant died after discharge from hospital.</td>
</tr>
<tr>
<td>Unable to locate:</td>
<td>Three unsuccessful attempts were made to locate infant. Attempts may include telephone contact; seeking the client in the home, clinic, school; and least preferable, by mail.</td>
</tr>
<tr>
<td>Refused visit:</td>
<td>Family refused home visit by nurse.</td>
</tr>
<tr>
<td>Services no longer needed:</td>
<td>Infant has minor anomaly (i.e., skin tag, anomaly of nails) that does not require follow-up.</td>
</tr>
<tr>
<td>Moved:</td>
<td>Family has moved out of area served by local health department. Refer to health department in other area.</td>
</tr>
<tr>
<td>Other:</td>
<td>Case closed for reason other those listed above. Specify reason.</td>
</tr>
<tr>
<td>Discharge diagnoses/additional:</td>
<td>Record up to 5 diagnoses: IDR diagnoses first, then additional diagnoses, if any.</td>
</tr>
<tr>
<td>ICD-9 Code:</td>
<td>For IDPH use only. IDPH will enter ICD-9 Code for each diagnosis.</td>
</tr>
<tr>
<td>Drug toxicity:</td>
<td>Check box if infant was diagnosed with drug toxicity.</td>
</tr>
<tr>
<td>Opioid:</td>
<td>If positive for drug toxicity, check all that have been identified.</td>
</tr>
<tr>
<td>Barbiturate:</td>
<td></td>
</tr>
</tbody>
</table>
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Cocaine:
Cannabis:
Mixed:
Not-stated:
Other: Include drug if known.

Newborn-screening: Check box if newborn genetic/metabolic screening has been completed.

Genetic-screening: Check box if infant was screened later for any genetic assessed condition.

Genetic-counseling: Check box if family received information concerning genetics.

Physical-assessment: Check box if you (the nurse visiting the family) completed a physical assessment on this visit. The Cornerstone physical assessment is expected on each visit, and will be documented on your agency’s records.

Additional-data:

Height: Height measured in inches.

Weight: Weight measured in pounds and ounces.

Head-circumference: Circumference of head measured in centimeters.

Hearing: Based on gross evaluation during physical exam or as a result of formal testing.

normal: Within normal limits.
suspect: Possible visual impairment.
impaired: Definite impairment.
NOTICE OF PROPOSED AMENDMENTS

| in treatment: | Active treatment for hearing impairment; or corrected with treatment. |
| Vision:       | Based on gross evaluation during physical exam or as a result of formal testing. |
| normal:       | Within normal limits. |
| suspect:      | Possible visual impairment. |
| impaired:     | Definite impairment. |
| corrected with surgery: | |
| corrected with lens: | |
| legally blind: | Determined by formal testing. |
| Denver II:    | |
| normal:       | No delays and a maximum of one caution. |
| suspect:      | Two or more cautions and one or more delays. |
| untestable:   | Refusal scores on one or more items completely to the left of the age line or on more than one item intersected by the age line on the 75% to 90% area. Prescreen in 1 to 2 weeks. |

Support service referrals: Infant referred to one or more services. Check as many as apply.

Audiology testing
Department of Children and Family Services (DCFS)

Developmental testing
Division of Specialized Care for Children

Early Intervention
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Genetic counseling/diagnosis

Home Health

Nutritional services

Occupational therapy

Physical therapy

Social services

Support group

WIC/nutrition

Other Please specify.

Signature of Nurse completing this form.

Send original copy of form to:

Illinois Department of Public Health
535 West Jefferson Street
Springfield, IL 62761

Copies—Canary copy: reporting hospital
Pink copy: local health agency
Goldenrod copy: primary care physician

(Source: Repealed at 34 Ill. Reg. ______, effective ___________)
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Section 640. APPENDIX G Sample Letter of Agreement

____________________________ (nameName of Administrative Perinatal Center) is recognized and designated by the Illinois Department of Public Health as a Level III Administrative Perinatal Center providing obstetrical and neonatal care. In order to serve as a Non-Birthing Hospital, Level I, II, II with Extended Neonatal Capabilities or III, affiliated with an Administrative Perinatal Center perinatal facility designated by the Illinois Department of Public Health, __________________________________________ (nameName and address of hospital) agrees to affiliate with the above Administrative Perinatal Center.


Components for Letter of Agreement

I. Introductory Remarks: The Administrative Perinatal Center may list items of organization of the Center.

II. Administrative Perinatal Center Obligations

A. A 24-hour obstetrical and neonatal "hot-line" for immediate consultation, referral or transport of perinatal patients is available.

<table>
<thead>
<tr>
<th>Obstetrical Hospital</th>
<th>Telephone #</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Neonatal Hospital</th>
<th>Telephone #</th>
</tr>
</thead>
</table>

B. The Administrative Perinatal Center shall will accept all medically eligible obstetrical/neonatal patients.

C. If the above named Administrative Perinatal Center is unable to accept a referred maternal or neonatal patient because of bed unavailability, that Center shall will assist in arranging for admission of the patient to another hospital facility capable of providing the appropriate level of care.

D. Transportation of neonatal patients remains the responsibility of the Administrative Perinatal Center. Decisions regarding transport and mode of transport will be made by the Administrative Perinatal Center neonatologist in collaboration with the referring health care provider physician.
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NOTICE OF PROPOSED AMENDMENTS

E. Transportation of the obstetrical patient remains the responsibility of the (Level I, Level II, Level II with Extended Neonatal Capabilities or Level III hospital facility). Decisions regarding transport, transfer and mode of transport or transfer shall be made by the Administrative Perinatal Center maternal-fetal medicine physician in collaboration with the referring health care provider.

F. The maternal-fetal medicine physician of the Administrative Perinatal Center, in collaboration with the referring health care provider, shall decide whether to have an obstetrical patient stabilized before transfer, kept in the affiliated unit or transferred immediately. The best possible alternatives and the staff needed for transport shall be determined.

G. The Administrative Perinatal Center shall distribute written protocols for the mechanism of referral/transfer/transport to the affiliated hospital physician, administration and nursing service. The content is to include a mechanism for data recording of the time, date and circumstances of transfer so that this information can be utilized as part of the morbidity and mortality reviews. (See Appendix A.)

H. The Administrative Perinatal Center shall send a written summary of patient management and outcome to the referring health care provider and to the hospital's chart.

I. The Administrative Perinatal Center shall conduct quarterly morbidity and mortality conferences at __________________________ Hospital.

1. The conference shall be conducted by the Perinatal Center's Perinatal Network Administrator, maternal-fetal medicine physician, neonatologist, nursing coordinator and/or obstetrical and neonatal nurse educators.

2. __________________________ Hospital shall prepare written summaries of cases and statistics for discussion, to be available to the Administrative Perinatal Center at least one week prior to the conference.

3. The content of the review shall be determined by the Regional Quality
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Council of each Regional Perinatal Network shall determine the content of the review. The review shall include, but not be limited to, stillbirths, neonatal deaths, maternal and/or neonatal transports.

J. The Administrative Perinatal Center shall transfer patients back to the referring hospital when medically feasible, in accordance with physician to physician consultation.

K. The Administrative Perinatal Center shall develop and offer Perinatal Outreach Education programs at a reasonable cost to include the following:

1. On-site consultation by Administrative Perinatal Center physicians and nurse educators as needed.

2. Periodic obstetrical and neonatal needs assessment of ______________ Hospital.

3. Provide ______________ Hospital with protocols for patient management.

4. Develop Continuing Medical Education programs for obstetricians, pediatricians and family practitioners either at ______________ Hospital or at the Administrative Perinatal Center site.

5. Mini-Fellowships at the Administrative Perinatal Center for ______________ Hospital physicians and nurses.

6. Programs based on needs assessment by outreach nurse educators at ______________ Hospital for obstetrical and neonatal nursing staff.

L. The Administrative Perinatal Center shall establish, maintain and coordinate the educational programs offered by and for all Non-Birthing Centers, Level I, Level II, Level II with Extended Neonatal Capabilities, and Level III hospitals that it serves, for which they serve.

M. The Administrative Perinatal Center shall develop a Regional Quality Council, including, but not limited to, representatives of each
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

hospital in the Regional Perinatal Network. This group shall meet at least quarterly to plan management strategies, evaluate morbidity and mortality reviews, evaluate the effectiveness of current programs and services and to set future goals. The Regional Quality Council Perinatal Management Group shall determine the data collection system to be used by the Regional Perinatal Network.

III. ________________ Hospital Obligations

A. ________________ Hospital shall will utilize the "hot-line" established by the Administrative Perinatal Center for consultation, referral and transport.

B. ________________ Hospital shall will transfer to ________________ Administrative Perinatal Center obstetrical and neonatal patients who require the services of the Administrative Perinatal Center, including, but not limited to, patients outlined in the Regionalized Perinatal Health Care Code perinatal rules and regulations (See Appendix H, Exhibits A and B) for patients to be included for consultation, treatment or transfer).

C. ________________ Hospital (level of care) shall will usually care for the following maternal and neonatal patients. (See Appendix H, Exhibits B and C)

D. ________________ Hospital shall will develop an ongoing in-house continuing educational program for the obstetrical and neonatal medical staff and other disciplines as needed.

E. ________________ Hospital shall will participate in continuing educational programs for both nurses and physicians developed by the ________________ Administrative Perinatal Center. Cost to be shared.

F. ________________ Hospital shall will designate representatives to serve on the ________________ Regional Quality Council Perinatal Management Group.

G. ________________ Hospital shall will establish a Perinatal Development Committee composed of medical and nursing representatives from both neonatal and obstetrical areas, administration and any other individuals deemed appropriate.

H. ________________ Hospital shall will maintain and share such statistics as the ________________ Regional Quality Council Perinatal Management Group
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

may deem appropriate.

I. ________________ Hospital shall develop or to utilize programs at ________________ Administrative Perinatal Center for follow-up of neonates with handicapping conditions.

IV. Joint Responsibilities

A. This agreement will be valid for one year, at which time it may be renewed or renegotiated.

B. If either ________________ Hospital or the ________________ Administrative Perinatal Center wishes to change an individualized portion of this agreement, either may initiate the discussion. If a change in the agreement is reached, it must be reviewed by the Department Perinatal Advisory Committee. If the ________________ Hospital wishes to make a change and ________________ Administrative Perinatal Center is not in agreement, ________________ Hospital can request a hearing by the Department Perinatal Advisory Committee.

C. If any of the institutions wants to terminate the agreement, written notification must be given to the Department and other participating institutions six months in advance.

(Source: Amended at 34 Ill. Reg. ______, effective ______________)
DEPARTMENT OF PUBLIC HEALTH

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Section 640.APPENDIX H  Written Protocol for Referral/Transfer/Transport

Section 640.EXHIBIT A  Level I: Patients for consultation with ____________ (Level III hospital facility or Administrative Perinatal Center)

1) Maternal Conditions

A) Previous Pregnancy Problems:
   i) Premature infant
   ii) Perinatal death or mental retardation
   iii) Isoimmunization
   iv) Difficult deliveries
   v) Congenital malformations
   vi) Mid-trimester loss

B) Current Pregnancy Problems:
   i) Any medical disorder (e.g., diabetes mellitus, hemoglobinopathy, chronic hypertension, heart disease, renal disease)
   ii) Drug addiction
   iii) Multiple gestation
   iv) Intrauterine growth retardation
   v) Preterm labor less than or equal to 36 weeks
   vi) Postdate greater than or equal to 42 weeks
   vii) Third trimester bleeding
   viii) Abnormal genetic evaluation
ILLINOIS REGISTER

DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

ix) Pregnancy induced hypertension

2) Neonatal Conditions
   A) Gestation less than or equal to 36 weeks, weight less than or equal to 2500 grams
   B) Small-for-gestational age (less than 10\textsuperscript{th} percentile)
   C) Sepsis
   D) Seizures
   E) Congenital heart disease
   F) Multiple congenital anomalies
   G) Apnea
   H) Respiratory distress
   I) Neonatal asphyxia
   J) Handicapping
      Infants identified as having handicapping conditions or developmental disabilities that threaten life or subsequent development
   K) Severe anemia
   L) Hyperbilirubinemia, not due to physiologic cause
   M) Polycythemia

3) Consultation and transfer to a Level III or Administrative Perinatal Center shall occur for the following conditions:
   A) Premature labor or premature birth less than 34 weeks gestation.
   B) Birth weight less than or equal to 2000 grams.
4) Exceptions:

A) Exceptions to the standards of care set forth in this Part may be necessary based on patient care needs, current practice, outcomes, and geography in the regional perinatal network.

B) Exceptions to the standards of care of this Part may be granted when the facility requesting an exception demonstrates that the staffing, equipment and quality of care (outcomes), are substantially equivalent to the standards and quality of care for any Level II or Level III facility in their Regional Perinatal Network.

C) Such exceptions shall be negotiated between the applicant facility and their Perinatal Center. The applicant facility or the Perinatal Center shall seek the advice and consultation of the Department, as well as the Perinatal Advisory Committee, to facilitate negotiations regarding exceptions to these standards of care. Any exception to the standards of care of this Part must be defined in the letter of agreement.

D) The Department shall review all letters of agreement and modification of letters of agreement. The Department shall use the criteria described in Section 640.41(e)(2) in order to approve or deny approval of any provision of or any letter of agreement.

(Source: Amended at 34 Ill. Reg. ______, effective ___________)
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Section 640.APPENDIX H  Written Protocol for Referral/Transfer/Transport

Section 640.EXHIBIT B  Level II: Patients for consultation with or transfer to
___________________ (Level III hospital facility or Administrative Perinatal Center)

1) Maternal Conditions (Consultation)
   A) Essential hypertension on medication.
   B) Chronic Renal disease.
   C) Chronic medical problems with known increase in perinatal mortality or morbidity.
   D) Prior birth of neonate with serious complication resulting in a handicapping condition.
   E) Abnormalities of the reproductive tract known to be associated with an increase in preterm delivery.
   F) Previous delivery of preterm infant 34 weeks gestation.
   G) Insulin-dependent diabetes Class B or greater.

2) Maternal Conditions (Transfer)
   A) Patients from the above consultation list, for whom transfer is deemed advisable by mutual collaboration between the maternal-fetal medicine physician at the Level III hospital facility and the obstetrician at the referring office of the hospital.
   B) Isoimmunization with possible need for intrauterine transfusion.
   C) Suspected congenital anomaly compatible with life.
   D) Insulin-dependent diabetes mellitus.
   E) Cardiopulmonary disease with functional impairment.
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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>F)</td>
<td>Multiple gestation, with exception of twins.</td>
</tr>
<tr>
<td>G)</td>
<td>Premature labor prior to 32 weeks.</td>
</tr>
<tr>
<td>H)</td>
<td>Premature rupture of membranes prior to 32 weeks.</td>
</tr>
<tr>
<td>I)</td>
<td>Medical and obstetrical complication of pregnancy, possibly requiring induction of labor or cesarean section for maternal or fetal conditions prior to 32 weeks gestation.</td>
</tr>
<tr>
<td>J)</td>
<td>Severe pre-eclampsia or eclampsia.</td>
</tr>
</tbody>
</table>

3) Neonatal Conditions (Consultation or transfer): Specify whether consultation or transfer will occur for each of the following:

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>A)</td>
<td>Gestation less than 32 weeks or less than 1800 grams.</td>
</tr>
<tr>
<td>B)</td>
<td>Sepsis unresponsive to therapy.</td>
</tr>
<tr>
<td>C)</td>
<td>Uncontrolled seizures.</td>
</tr>
<tr>
<td>D)</td>
<td>Significant congenital heart disease.</td>
</tr>
<tr>
<td>E)</td>
<td>Major congenital malformations requiring surgery.</td>
</tr>
<tr>
<td>F)</td>
<td>Assisted ventilation required Infants requiring ventilation after initial stabilization (greater than 6 hours).</td>
</tr>
<tr>
<td>G)</td>
<td>Oxygen Infants with oxygen requirements in excess of 50% (greater than 6 hours).</td>
</tr>
<tr>
<td>H)</td>
<td>Infants with ten-minute Apgar scores of 5 or less.</td>
</tr>
<tr>
<td>I)</td>
<td>Major All neonates requiring major surgery.</td>
</tr>
<tr>
<td>J)</td>
<td>Exchange Infants requiring exchange transfusion.</td>
</tr>
<tr>
<td>K)</td>
<td>Persistent metabolic derangement (e.g., hypocalcemia, hypoglycemia, metabolic acidosis).</td>
</tr>
</tbody>
</table>
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

L) **Handicapping** Infants identified as having handicapping conditions or developmental disabilities that threaten life or subsequent development.

4) Consultation and transfer to a Level III hospital or Administrative Perinatal Center shall occur for the following conditions:

A) Premature labor or premature birth less than 34 weeks gestation.

B) **Birth weight** less than or equal to 2000 grams.

C) **Assisted Mechanical** ventilation beyond the initial stabilization period (6 hours).

5) Exceptions:

A) Exceptions to the standards of care set forth in this Part may be necessary based on patient care needs, current practice, outcomes, and geography in the regional perinatal network.

B) Exceptions to the standards of care of this part may be granted when the facility requesting an exception demonstrates that the staffing, equipment and quality of care (outcomes), are substantially equivalent to the standards and quality of care for any Level II or Level III facility in their Regional Perinatal Network.

C) Such exceptions shall be negotiated between the applicant facility and their Perinatal Center. The applicant facility or the Perinatal Center may seek the advice and consultation of the Department, as well as the Perinatal Advisory Committee, to facilitate negotiations regarding exceptions to these standards of care. Any exception to the standards of care of this part must be defined in the letter of agreement.

D) The Department shall review all letters of agreement and modification of letters of agreement. The Department shall use the criteria described in Section 640.41(e)(2) in order to approve or deny approval of any provision of or any letter of agreement.

(Source: Amended at 34 Ill. Reg. ______, effective ___________)
Section 640.APPENDIX H  Written Protocol for Referral/Transfer/Transport

Section 640.EXHIBIT C  Level I: Maternal and neonatal Neonatal patients to be cared for at ________________ hospital (Level III hospital facility or Administrative Perinatal Center)

1) Maternal

The maternal patient with an uncomplicated current pregnancy.

2) Neonatal

The neonatal patient greater than 34 weeks gestation or greater than 2000 grams without risk factors and infants with physiologic jaundice.

(Source: Amended at 34 Ill. Reg. _____, effective _____________)
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Section 640. APPENDIX H  Written Protocol for Referral/Transfer/Transport

Section 640. EXHIBIT D  Level II: Maternal and neonatal patients to be cared for at
________________________ hospital (Level III hospital | facility or Administrative Perinatal Center)

1) Maternal

   A) The maternal patient with uncomplicated current pregnancy.

   B) Patient with normal | Normal | current pregnancy, although previous history may suggest | be suggestive of potential difficulties.

   C) Patient with selected | Selected | medical conditions, such as mild hypertension or controlled thyroid disease, when there is no increase in perinatal morbidity.

   D) Patient with selected | Selected | obstetric complications such as pre-eclampsia or premature labor greater than 34 weeks.

   E) Patient with an incompetent cervix | Incompetent.

   F) Patient with gestational diabetes | Gestational.

2) Neonatal

   A) Patients | Neonatal patients | greater than 34 weeks gestation or greater than 1800 grams without risk factors.

   B) Patients with mild | Mild | to moderate respiratory distress (not requiring assisted | mechanical ventilation in excess of 6 hours).

   C) Patients with suspected | Suspected | neonatal sepsis, hypoglycemia, neonates of diabetic mothers and post-asphyxia without life-threatening sequelae.

   D) Premature | Nursing care of premature | infants greater than 1800 grams who are otherwise | otherwise well.

(Source: Amended at 34 Ill. Reg. ______, effective ______________)
Section 640. APPENDIX I  Perinatal Reporting System Data Elements

1. Child's First Name
2. Child's Middle Name
3. Child's Last Name
4. Child's Suffix
5. AKA
6. Child's Date of Birth
7. Child's Time of Birth
8. Sex
   A. Male
   B. Female
   C. Ambiguous
9. Child of Hispanic Origin
   A. Yes
      Cuban
      Mexican
      Puerto Rican
   B. No
   A. White
   B. Black
   C. Asian
   D. Other
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

10. Race
   A. Hispanic
   B. Asian
   C. Black
   D. Caucasian
   E. Native American
   F. Other
      A. Yes
      B. No
      C. N/A

11. Place of Birth
12. City of Birth
13. County of Birth
14. Mother's First Name
15. Mother's Middle Name
16. Mother's Last Name
17. Mother's Maiden Name
18. Mother's Social Security Number
19. Mother's Date of Birth
20. Mother's Street Number
DEPARTMENT OF PUBLIC HEALTH

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21. Mother's Street Name
22. Mother's Street Direction
23. Mother's Street Type
24. Mother's Street Location
25. Mother's City
26. Mother's County
27. Mother's Zip Code
28. Mother's State
29. Mother's Telephone
30. Mother's Age
31. Mother's Birthplace
   A. _____State
   B. _____County
32. Mother of Hispanic Origin
   A. Yes
      Cuban
      Mexican
      Puerto Rican
   B. No
33. Mother's Race
   A. Asian
DEPARTMENT OF PUBLIC HEALTH

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B. Black
C. Caucasian
D. Native American
E. Other

A. American Indian
B. Black
C. White

34. Mother's Education (specify highest grade completed)

35. Mother's Occupation

36. Mother's Business/Industry

37. Mother Employed During Pregnancy
   A. Yes
   B. No
   C. Record Not Available (N/A)
   D. Not Stated

38. Marital Status
   A. Married
   B. Not Married

39. Father's Last Name
DEPARTMENT OF PUBLIC HEALTH

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40. Father's Middle Name

41. Father's First Name

42. Father of Hispanic Origin
   A. Yes
      Cuban
      Mexican
      Puerto Rican
   B. No

43. Father's Race
   A. Asian
   B. Black
   C. Caucasian
   D. Native American
   E. Other
      A. Indian-American
      B. Black
      C. White

44. Father's Education (specify highest grade completed)

45. Father's Age

46. Father's Occupation

47. Father's Business/Industry
DEPARTMENT OF PUBLIC HEALTH

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48. Father Employed
   A. Yes
   B. No
   C. Record N/A
   D. Not Stated

49. Pregnancy History
50. Plurality (# this Birth)
    If greater than 1, Birth Order of this Birth

51. Previous Live Births
52. Number Live Births Now Living
53. Number Live Births Now Dead
54. Date of Last Live Birth
55. Previous Terminations
56. Number of Other Terminations
57. Date of Last Other Termination
58. Date of Last Normal Menses
59. Month Prenatal Care Began
60. Number of Prenatal Care Visits
61. 1 Minute Apgar Score
DEPARTMENT OF PUBLIC HEALTH

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62. 5 Minute Apgar Score

63. Estimate of Number of Gestation Weeks

64. Mother Transferred In Prior to Delivery
   A. Yes
   B. Name of Hospital Facility
      Location of Hospital Facility
   C. No

65. Infant Transferred (Out)
   A. Yes
   B. Names of Hospital Facility
      Location of Hospital Facility
   C. Transfer Code
   D. No

66. Reporting Hospital

67. Reporting Hospital City

68. Tobacco Use During Pregnancy
   A. Smoked during pregnancy
      Average cigarettes per day
   B. Stopped smoking during pregnancy
   C. Smoked during pregnancy
   C. Does not smoke
69. Alcohol Use During Pregnancy
   A. Yes
      Average number drinks per day ______
   B. No
   C. Record N/A
   D. Not Stated

70. Mother's Weight Gain
   A. Yes
      Pounds ______
   B. No
   C. Record N/A
   D. Not Stated

71. Mother's Weight Loss
   A. Yes
      Pounds ______
   B. No
   C. Record N/A
   D. Not Stated

72. Medical Risk Factors for this Pregnancy
DEPARTMENT OF PUBLIC HEALTH

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A. Anemia
B. Cardiac Disease
C. Acute or Chronic Lung Disease
D. Diabetes
E. Genital Herpes
F. Hydramnios/Oligohydramnios
G. Hemoglobinopathy
H. Hypertension, Chronic
I. Hypertension, Pregnancy-related
J. Eclampsia
K. Incompetent Cervix
L. Previous Infant 4000 + Grams
M. Previous Preterm or Small-for-Gestational-Age (SGA) Infant
N. Renal Disease
O. Rh Sensitization
P. Uterine Bleeding
Q. None
R. Other, Specify

73. Obstetric Procedures
DEPARTMENT OF PUBLIC HEALTH

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A. Amniocenteses

B. Electronic Fetal Monitoring
   - Internal
   - External
   - Both
   - Neither
   - Record N/A
   - Not Stated

C. Induction of Labor

D. Stimulation of Labor

K. Yes
   - Pitocin
   - Oxytocin

L. No

M. Record N/A

N. Not Stated

E. O. Tocolysis

F. P. Ultrasound

G. Q. None

H. R. Other, Specify

74. Complications of Labor and/or Delivery

A. Febrile

B. Meconium

C. Premature Rupture

D. Abruptio Placenta

E. Placenta Previa
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<tbody>
<tr>
<td>F.</td>
<td>Other Excessive <strong>Bleeding</strong></td>
</tr>
<tr>
<td>G.</td>
<td>Seizures <strong>During Labor</strong></td>
</tr>
<tr>
<td>H.</td>
<td>Precipitous <strong>Labor</strong></td>
</tr>
<tr>
<td>I.</td>
<td>Prolonged <strong>Labor</strong></td>
</tr>
<tr>
<td>J.</td>
<td>Dysfunctional <strong>Labor</strong></td>
</tr>
<tr>
<td>K.</td>
<td>Breech/Malpresentation</td>
</tr>
<tr>
<td>L.</td>
<td>Cephalopelvic Disportion</td>
</tr>
<tr>
<td>M.</td>
<td>Cord Prolapse</td>
</tr>
<tr>
<td>N.</td>
<td>Anesthetic <strong>Complications</strong></td>
</tr>
<tr>
<td>O.</td>
<td>Fetal Distress</td>
</tr>
<tr>
<td>P.</td>
<td>None</td>
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<tr>
<td>Q.</td>
<td>Other, Specify</td>
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75. Method of Delivery

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<tbody>
<tr>
<td>A.</td>
<td><strong>Spontaneous</strong> Vaginal</td>
</tr>
<tr>
<td>B.</td>
<td>Mid – Low Forceps</td>
</tr>
<tr>
<td>C.</td>
<td>Vacuum Extraction</td>
</tr>
<tr>
<td>D.</td>
<td>Vaginal Breech</td>
</tr>
<tr>
<td>E.</td>
<td><strong>Caesarean</strong> Section Primary</td>
</tr>
<tr>
<td>F.</td>
<td><strong>Caesarean</strong> Section Repeat</td>
</tr>
</tbody>
</table>
DEPARTMENT OF PUBLIC HEALTH
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G. Other Type

H. Record N/A

I. Not Stated

J. Vaginal Birth After Previous Caesarean Section (VBAC)

K. Other Caesarean Section

76. Abnormal Conditions of Newborn
77. Anemia
78. Birth Injury
79. Fetal Alcohol Syndrome
80. Hyaline Membrane Disease
81. Meconium Aspiration Syndrome
82. Assisted Ventilation > 30 min.
83. Assisted Ventilation = 30 min.
84. Seizures
85. Human Immunodeficiency Virus (HIV) None
86. Other Specify
87. Congenital Anomalies of Newborn Child
88. Anencephalous Anacephalus
89. Congenital Syphilis
90. Hypothyroidism
DEPARTMENT OF PUBLIC HEALTH

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91. Adrenogenital Syndrome
92. Inborn Errors of Metabolism
93. Cystic Fibrosis
94. Immune Deficiency Disorder
95. Retinopathy of Prematurity
96. Chorioretinitis
97. Strabismus
98. Intrauterine Growth Restriction
99. Cerebral Lipidoses

100. Spina Bifida/Meningocele
101. Hydrocephalus
102. Microcephalus

103. Other CNS Anomalies, Specify ____________
104. Heart Malformations, Specify ____________
105. Other Circulatory/Respiratory Anomalies, Specify ____________
106. Rectal Atresia/Stenosis
107. Tracheoesophageal Fistula/Esophageal Atresia
108. Omphalocele/Gastrochisis
109. Other Gastrointestinal Anomaly
DEPARTMENT OF PUBLIC HEALTH

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<table>
<thead>
<tr>
<th>110.99.</th>
<th>Malformed Genitalia</th>
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</thead>
<tbody>
<tr>
<td>111.100.</td>
<td>Renal Agenesis</td>
</tr>
<tr>
<td>112.101.</td>
<td>Other Urogenital Anomaly, Specify ____________</td>
</tr>
<tr>
<td>113.102.</td>
<td>Cleft Lip/Palate, Specify ____________</td>
</tr>
<tr>
<td>114.103.</td>
<td>Polydactyly/Syndactyly/Adactyly</td>
</tr>
<tr>
<td>115.104.</td>
<td>Club Foot</td>
</tr>
<tr>
<td>116.105.</td>
<td>Diaphragmatic Hernia</td>
</tr>
<tr>
<td>117.106.</td>
<td>Other Musculoskeletal/Musculoskeletal/Integumental Anomaly</td>
</tr>
<tr>
<td>118.107.</td>
<td>Down's Syndrome</td>
</tr>
<tr>
<td>119.108.</td>
<td>Other Chromosomal Anomaly, Specify ____________ Specify</td>
</tr>
<tr>
<td>120.109.</td>
<td>None</td>
</tr>
<tr>
<td>121.110.</td>
<td>Other, Specify ____________</td>
</tr>
<tr>
<td>122.111.</td>
<td>Transfusion</td>
</tr>
<tr>
<td>123.112.</td>
<td>Anesthesia</td>
</tr>
<tr>
<td>A.</td>
<td>Local/Pudenal</td>
</tr>
<tr>
<td>B.</td>
<td>Regional</td>
</tr>
<tr>
<td>C.</td>
<td>General</td>
</tr>
<tr>
<td>124.113.</td>
<td>Umbilical Cord Blood Gases Tested</td>
</tr>
<tr>
<td>A.</td>
<td>Yes</td>
</tr>
<tr>
<td>B.</td>
<td>No</td>
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</tbody>
</table>
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| 125.114. | Small-for-Gestational-Age (SGA) |
| 126.115. | Infection of Newborn Acquired Before Birth |
| 127.116. | Infection of Newborn Acquired During Birth |
| 128.117. | Infection of Newborn Acquired After Birth |
| 129.118. | Hereditary Hemolytic Anemias |
| 130.119. | Hemolytic Diseases of the Newborn |
| 131.120. | Due to Rh Incompatibility Only |
| 132.121. | Due to ABO Incompatibility |
| 133.122. | Due to Other Causes |
| 134.123. | Drug Toxicity or Withdrawal |
|         | A. Yes, Specify __________ |
|         | B. No |
| 135.124. | Highest Bilirubin, Total ______ |
| 136.125. | Admit to Designated Patient Unit |
|         | A. Yes |
|         | B. No |
| 137.126. | Genetic Screenings Conducted |
| 138.127. | Rh Determination |
|         | A. Mother's Blood Type ______ Rh Factor ______ |
|         | Immune Globulin Given |
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<tr>
<td>B.</td>
<td>Yes</td>
</tr>
<tr>
<td>C.</td>
<td>No</td>
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139. Yes

Hepatitis B – Surface Antigen

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<tr>
<td>A.</td>
<td>Positive</td>
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<tr>
<td>B.</td>
<td>Negative</td>
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140. Yes

Non-Obstetrical Infections

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<tbody>
<tr>
<td>A.</td>
<td>Syphilis</td>
</tr>
<tr>
<td>B.</td>
<td>Gonorrhea</td>
</tr>
<tr>
<td>C.</td>
<td>Rubella</td>
</tr>
<tr>
<td>D.</td>
<td>Other</td>
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141. Yes

Obstetrical Infections

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<tbody>
<tr>
<td>A.</td>
<td>Antepartum Amnionitis/Chioramnionitis Urinary Tract Infection</td>
</tr>
<tr>
<td>B.</td>
<td>Postpartum Endometritis Infection of Wound Urinary Tract Infection</td>
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142. Yes

Mother admitted within 72 hours after delivery

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<tbody>
<tr>
<td>A.</td>
<td>Precipitous Delivery</td>
</tr>
<tr>
<td>B.</td>
<td>Planned Home Birth</td>
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</tbody>
</table>

143. Yes

Drug Use During Pregnancy
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

A. Cocaine
B. Heroin
C. Marijuana
D. Other Street Drugs
E. None
F. Record N/A
G. Not Stated

| 144.433. | Transfusion |
| 145.434. | Prenatal Screening Conducted for |
| A. Gestational Diabetes (Blood Glucose Tolerance Test) |
| B. Congenital/Birth Defects |
| A. Maternal Alpha Feta Protein |
| B. Chromosomal |
| C. Other |

| 146.435. | Number of Days Maintained on Ventilation Before Transfer to Level III Center- Days |
| 147.436. | Prenatal Ultrasound |
| A. Yes |
| B. No |
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

C. Record N/A

D. Not Stated

| 148.437. | Chorionic Villus Sampling |
| 149.438. | Were Newborn Screening Tests Conducted? |
| | A. Yes |
| | B. No |

| 150.439. | Mother Transferred Out to Another Hospital After Delivery Destination Hospital Code |
| 151.440. | Mother Transferred From Emergency Room |
| 152.441. | Infant Transferred In Transfer Code |
| 153.442. | Consult Administrative Perinatal Center or Another Level III |
| 154.443. | Infant Maternal |
| | A. Yes, with W/Transfer |
| | B. Yes, No Transfer |
| | C. No Consultation |
| | D. Not Stated |

| 155.444. | Mother Died In Hospital |
| 156.445. | Fetal Death |
| 157.446. | Infant Died in Hospital |
| 158.447. | Extrauterine Pregnancy |
NOTICE OF PROPOSED AMENDMENTS

159.148. Ectopic Pregnancy

160.149. Admission Date – Infant

161.150. Admission Date – Maternal

162.151. Discharge Date – Infant

163.152. Discharge Date – Maternal

164.153. Payment Method

A. Yes

Medicaid
Medicaid HMO
HMO
Medicare
CHAMPUS
Title V
Health Insurance
Self Pay
Record N/A
Not Stated
Health Ins/$/
Other, Specify ________

B. No

165.154. Were prenatal records available prior to delivery?

A. Yes

B. No

166.155. Maternal Diagnosis (Specify up to 8 Diagnoses)

167.156. Mother's Medical Record Number ________________
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

168. Infant Diagnoses (Including Congenital Anomalies); Specify up to 8 diagnoses

169. Infant Released to:
   A. Home
   B. Other Hospital Name and Location ________________
   C. Long Term Care Name and Location ________________
   D. Other Child Care Agency Name and Location ________________

170. Infant Patient ID ________________

171. Infant Medical Record Number ________________

172. Referrals
   A. Community Social Services
   B. Division of Specialized Services for Children (DSCC)
   C. DCFS
   D. Department of Healthcare and Family Services (HFS)
   E. Department of Children and Family Services (DCFS)
   F. Other, Specify ________________
   G. None
   H. Early Intervention program
   I. Other ________________

173. Feedings
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

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<td>174.163.</td>
<td>Breast Fed</td>
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<td>175.164.</td>
<td>Bottle</td>
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<td>176.165.</td>
<td>Tube</td>
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<td>178.167.</td>
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<td>179.168.</td>
<td>Amount</td>
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<td>180.169.</td>
<td>Infant Medications</td>
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<td>Birth Weight</td>
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<td>Birth Head Circumference</td>
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<td>183.172.</td>
<td>Birth Length</td>
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<td>184.173.</td>
<td>Discharge Weight</td>
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<td>185.174.</td>
<td>Discharge Head Circumference</td>
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<td>186.175.</td>
<td>Discharge Length</td>
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<td>187.176.</td>
<td>Infant Discharge Treatment</td>
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<td>188.177.</td>
<td>Other Concerns</td>
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<td>189.178.</td>
<td>RN Contact at Hospital – Phone Number</td>
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<td>190.179.</td>
<td>Relative/Friend</td>
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<td>191.180.</td>
<td>Relationship</td>
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<td>192.181.</td>
<td>Address/Phone #</td>
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DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

193. Family informed of Local Health Nurse LHN Visit
   A. Yes
   B. No

194. Primary Care Physician's Name –

195. Mother Gravida Para F_ P_ A_ L_

196. Signature

197. Title

198. Report Date

188. Other Infant Diagnoses

189. Congenital Syphilis

190. Hypothyroidism

191. Adrenogenital Syndrome

192. Inborn Errors of Metabolism

193. Cystic Fibrosis

194. Immune Deficiency Disorder

195. Leukemia

196. Constitutional Aplastic Anemia

197. Coagulation Defects

198. Neurofibromatosis

199. Retinopathy of prematurity
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

200. Chorioretinitis
201. Strabismus
202. Endocardial Fibroelastosis
203. Occlusion of Cerebral Arteries
204. Intrauterine Growth Retardation
205. Cerebral Lipidoses

(Source: Amended at 34 Ill. Reg. ______, effective ____________)
Section 640 APPENDIX J Guideline for Application Process for Designation, Redesignation or Change in Designation

Initial Process:

The hospital administration shall:

Send a Letter of Intent for change in status to the Department and affiliated Administrative Perinatal Center 6 to 12 months before expected review by the PAC.

Prepare appropriate documents for site visit. Required documents and assistance with preparation are available through affiliate Administrative Perinatal Center. The site visit team will include, but not be limited to, Co-Directors of Administrative Perinatal Center and Network Administrator, Perinatal Advisory Committee and Department. The Department will assign the additional representatives required.

Send information three weeks in advance of the scheduled site visit to:

Illinois Department of Public Health
Perinatal Program Administrator
535 West Jefferson
Springfield, Illinois 62761

Assemble appropriate representation from the hospital on the day of the site visit to be available to present an overview of the hospital and to answer questions from the site visit team. Hospital representatives should include at a minimum:

- Hospital administration
- Chair of OB/GYN
- Chair of Family Practice, if appropriate
- Chair of Pediatrics
- Director of Anesthesiology
- Director of Maternal-Fetal Medicine, if appropriate
- Director of Neonatology, if appropriate
- Director of Nursing

Once the site visit has been completed and the hospital and Administrative Perinatal Center are satisfied that the application is complete, the Administrative Perinatal Center will contact the Department in writing to schedule application review before the Perinatal Advisory Committee.
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

On the day of the review, the following representatives must be present from the hospital to be reviewed:

- Hospital administration
- Chair of OB/GYN
- Chair of Family Practice, if appropriate
- Chair of Pediatrics
- Director of Maternal-Fetal Medicine, if appropriate
- Director of Neonatology, if appropriate
- Director of Nursing
- Co-Directors of Affiliate Perinatal Network
- Network Administrator from Affiliate Perinatal Network
- Other personnel as identified by hospital, Perinatal Advisory Committee or Sub-Committee

After reviewing the application, the PAC will present a formal outline of the issues and recommendations to the Department.

After review of the recommendations and deliberations, the Department will send a formal letter as to the status of the hospital.

The hospital and the Administrative Perinatal Center will work together to address the recommendation in the follow-up letter.

The Administrative Perinatal Center will be responsible for monitoring any indicators or required changes that are identified by the PAC.

In preparation for re-review, the hospital and Administrative Perinatal Center will prepare information only on issues addressed in the follow-up letter.

The Administrative Perinatal Center will contact the Department to schedule the re-review meeting.

The Administrative Perinatal Center will send appropriate documents, identified in the follow-up letter, to the Department three weeks before the re-review is scheduled.
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Only representatives from the Administrative Perinatal Center shall attend the re-review meeting to answer any questions the review committee may have concerning the identified items. Hospital representatives may attend the meeting if they choose.

The Illinois Department of Public Health will send a formal follow-up letter to the hospital and the Administrative Perinatal Center concerning the outcome of the meeting and any follow-up instructions.

(Source: Added at 34 Ill. Reg. ______, effective ____________)
NOTICE OF PROPOSED AMENDMENTS

Section 640. APPENDIX K  Elements for Submission for Designation, Redesignation or Change in Designation

Level III Review

- Appendix A
- Resource Checklist for Level III
- Evaluation letter from Administrative Perinatal Center
- Vita for co-directors
- Credentials for Obstetric (OB)/Family Practice (FP) physicians, Advance Practice Nurses (APN), Neonatology & Anesthesia
- Copy of OB/Peds Departmental Rules
- Maternal-Fetal Medicine (MFM), Neonatology Consultation/referral tool/QA reports for 3 months
- Mortality and Morbidity (M&M) statistics and description of the process/participation
- Transport statistics, both into and out of hospital
- Listing of educational classes
- Description of educational classes
- Description of CQI
- 3 months of call schedules for OB, Maternal-Fetal Medicine and Neonatology (current and last 2 actual or 3 proposed schedules)

Level II with Extended Neonatal Capabilities Review

- Appendix A
- Resource Checklist for Level II with Extended Neonatal Capabilities
- Evaluation letter from Administrative Perinatal Center
- Vita for Director of Neonatology, Maternal-Fetal Medicine (MFM), if appropriate
- Credentials for Obstetricians/Family Practice physicians, Advanced Practice Nurses (APN), Neonatology & Anesthesia
- Copy of OB/Peds Departmental Rules
- Consultation/referral tool/QA reports for 3 months
- Mortality and Morbidity (M&M) statistics and description of process/participation
- Transport statistics, both into and out of hospital
- Listing of educational classes
- Description of CQI
- 3 months of call schedules for OB, MFM and Neonatology as appropriate
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

Level II Review

- Appendix A
- Resource Checklist for Level II
- Evaluation letter from Administrative Perinatal Center
- Credentials for Obstetrics (OB)/Family Practice (FP) physicians, Advance Practice Nurses (APN), Neonatology & Anesthesia
- Copy of OB/Peds Departmental Rules
- Consultation/referral tool/QA reports for 3 months
- Mortality and Morbidity (M&M) statistics and description of process/participation
- Transport statistics – out of hospital
- Listing of educational classes
- Description of CQI

Level I Review

- Appendix A
- Resource Checklist for Level I
- Evaluation letter from Administrative Perinatal Center
- Credentials for Obstetrics (OB)/Family Practice (FP) physicians, Advance Practice Nurses (APNs), Neonatology & Anesthesia
- Mortality and Morbidity (M&M) statistics and description of process/participation
- Transport statistics – out of hospital
- Listing of educational classes
- Description of CQI

Administrative Perinatal Center

- Network description
- Educational programs
- Network projects
- Discussion with representatives from Regional Network Hospitals
- Network participation
- Network evaluation
- Network challenges
- Network M&M statistics
- University integration

(Source: Added at 34 Ill. Reg. _______, effective ____________ )
Section 640.APPENDIX L  Level I Resource Checklist

Level I Resource Checklist
Briefly describe institutional compliance:

1. The hospital shall provide continuing education for medical, nursing, respiratory therapy and other staff who provide general perinatal services, with evidence of a yearly competence assessment appropriate to the population served.

RECOMMENDATIONS:

2. The hospital shall provide documentation of participation in Continuous Quality Improvement (CQI) implemented by the Administrative Perinatal Center.

RECOMMENDATIONS:

3. The hospital shall provide documentation of the health care provider's risk assessment and consultation with a maternal-fetal medicine sub-specialist or neonatologist as specified in the letter of agreement and hospital's policies and procedures, and transfer to the appropriate level of care.

RECOMMENDATIONS:

4. The hospital shall provide documentation of the availability of trained personnel and facilities to provide competent emergency obstetric and newborn care.

RECOMMENDATIONS:

5. The hospital shall maintain a system of recording admissions, discharges, birth weight, outcome, complications and transports to meet the requirement to support CQI activities described in the hospital's letter of agreement with the Administrative Perinatal Center. The hospital shall comply with the reporting requirements of the State Perinatal Reporting System.

RECOMMENDATIONS:

6. The hospital shall provide documentation of the capability for continuous electronic maternal-fetal monitoring for patients identified at risk with staff available 24 hours a day, including physicians and nursing, who are knowledgeable of electronic fetal
monitoring use and interpretation. Staff shall complete a competence assessment in electronic maternal-fetal monitoring every two years.

RECOMMENDATIONS:

7. The hospital shall have the capability of performing caesarean sections (C-sections) within 30 minutes of decision-to-incision.

RECOMMENDATIONS:

8. The hospital shall have blood bank technicians on call and available within 30 minutes for performance of routine blood banking procedures.

RECOMMENDATIONS:

9. The hospital shall have general anesthesia services on call and available under 30 minutes to initiate C-section.

RECOMMENDATIONS:

10. The hospital shall have radiology services available within 30 minutes.

RECOMMENDATIONS:

11. The hospital shall have the following clinical laboratory resources available:

Microtechniques for hematocrit, within 15 minutes; glucose, blood urea nitrogen (BUN), creatinine, blood gases, routine urine analysis, complete blood count, routine blood chemistries, type & cross, Coombs test, bacterial smear within 1 hour; and capabilities for bacterial culture and sensitivity and viral culture.

RECOMMENDATIONS:

12. The hospital shall designate a physician to assume primary responsibility for initiating, supervising and reviewing the plan for management of distressed infants. Policies and procedures shall assign responsibility for the identification and resuscitation of distressed neonates to individuals who have successfully completed a neonatal resuscitation program and are both specifically trained and immediately available in the hospital at all times.
DEPARTMENT OF PUBLIC HEALTH

NOTICE OF PROPOSED AMENDMENTS

RECOMMENDATIONS:

13. The hospital shall be responsible for assuring that staff physicians and consultants are aware of standards and guidelines in the letter of agreement.

RECOMMENDATIONS:

14. The hospital shall provide documentation of health care provider participation in Joint Mortality and Morbidity reviews.

RECOMMENDATIONS:

(Source: Added at 34 Ill. Reg. _____, effective ___________)


**Section 640. APPENDIX M  Level II Resource Checklist**

**Level II Resource Checklist**
**Briefly describe institutional compliance:**

The Level II hospital shall provide all of the services outlined for Level I general care.

1. The hospital shall provide continuing education for medical, nursing, respiratory therapy and other staff who provide general perinatal services, with evidence of a yearly competence assessment appropriate to the population served.
   
   **RECOMMENDATIONS:**

2. The hospital shall provide documentation of participation in Continuous Quality Improvement (CQI) implemented by the Administrative Perinatal Center.
   
   **RECOMMENDATIONS:**

3. The hospital shall provide documentation of the health care provider’s risk assessment and consultation with a maternal-fetal medicine sub-specialist or neonatologist as specified in the letter of agreement and hospital’s policies and procedures, and transfer to the appropriate level of care.
   
   **RECOMMENDATIONS:**

4. The hospital shall provide documentation of the availability of trained personnel and facilities to provide competent emergency obstetric and newborn care.
   
   **RECOMMENDATIONS:**

5. The hospital shall maintain a system of recording admissions, discharges, birth weight, outcome, complications and transports to meet the requirement to support CQI activities described in the hospital’s letter of agreement with the Administrative Perinatal Center. The hospital shall comply with the reporting requirements of the State Perinatal Reporting System.
   
   **RECOMMENDATIONS:**
6. The hospital shall provide documentation of the capability for continuous electronic maternal-fetal monitoring for patients identified at risk with staff available 24 hours a day, including physicians and nursing, who are knowledgeable of electronic fetal monitoring use and interpretation. Staff shall complete a competence assessment in electronic maternal-fetal monitoring every two years.

RECOMMENDATIONS:

7. The hospital shall have the capability of performing caesarean sections within 30 minutes of decision to incision.

RECOMMENDATIONS:

8. The hospital shall have experienced blood bank technicians immediately available in the hospital for blood banking procedures and identification of irregular antibodies. Blood component therapy shall be readily available.

RECOMMENDATIONS:

9. The hospital shall have general anesthesia services on call and available under 30 minutes to initiate C-section.

RECOMMENDATIONS:

10. The hospital shall have experienced radiology technicians immediately available in the hospital with professional interpretation available 24 hours a day. Ultrasound capability shall be available 24 hours a day. In addition, Level I ultrasound and staff knowledgeable in its use and interpretation shall be available 24 hours a day.

RECOMMENDATIONS:

11. The hospital shall have the following clinical laboratory resources available:

Micro-techniques for hematocrit and blood gases within 15 minutes; glucose, blood urea nitrogen (BUN), creatinine, blood gases, routine urine analysis, electrolytes and coagulation studies, complete blood count, routine blood chemistries, type & cross, Coombs’ test, bacterial smear within 1 hour; and capabilities for bacterial culture and sensitivity and viral culture.
RECOMMENDATIONS:

12. The hospital shall designate a physician to assume primary responsibility for initiating, supervising and reviewing the plan for management of distressed infants. Policies and procedures shall assign responsibility for the identification and resuscitation of distressed neonates to individuals who have successfully completed a neonatal resuscitation program and are both specifically trained and immediately available in the hospital at all times.

RECOMMENDATIONS:

13. The hospital shall ensure that personnel skilled in phlebotomy and IV placement in newborns are available 24 hours a day.

RECOMMENDATIONS:

14. Social worker services shall be provided by one social worker, with relevant experience and responsibility for perinatal patients, and available through the hospital social work department.

RECOMMENDATIONS:

15. The hospital shall ensure that protocols for discharge planning, routine follow-up care, and developmental follow-up are established.

RECOMMENDATIONS:

16. The hospital shall ensure that a licensed respiratory care practitioner with experience in neonatal care is available 24 hours a day.

RECOMMENDATIONS:

17. The hospital shall ensure that a dietitian with experience in perinatal nutrition is available to plan diets to meet the needs of mothers and infants.

RECOMMENDATIONS:

18. The hospital shall ensure that staff physicians and consultants are aware of standards and guidelines in the letter of agreement.
RECOMMENDATIONS:

19. The hospital shall provide documentation of health care provider participation in Joint Mortality and Morbidity reviews.

(Source: Added at 34 Ill. Reg. ______, effective ____________)
Section 640. APPENDIX N  Level II with Extended Neonatal Capabilities Resource Checklist

Level II with Extended Neonatal Capabilities Resource Checklist

Briefly describe institutional compliance:

1. The hospital shall provide documentation that the obstetrical activities are directed and supervised by a full-time board-certified obstetrician or a licensed osteopathic physician with equivalent training and experience and certification by the American Osteopathic Board of Obstetricians and Gynecologists.

RECOMMENDATIONS:

2. The hospital shall provide documentation that the neonatal activities are directed and supervised by a full-time pediatrician certified by the American Board of Pediatrics Sub-Board of Neonatal/Perinatal Medicine or a licensed osteopathic physician with equivalent training and experience and certification by the American Osteopathic Board of Pediatricians.

RECOMMENDATIONS:

3. The directors of obstetrics and neonatal services shall ensure back-up supervision of their services when they are unavailable.

RECOMMENDATIONS:

4. The hospital shall provide documentation that the obstetric-newborn nursing service is directed by a full-time nurse experienced in perinatal nursing, preferably with a master's degree.

RECOMMENDATIONS:

5. The hospital shall provide documentation that the pediatric-neonatal respiratory therapy services are directed by a full-time licensed respiratory care practitioner with a bachelor's degree.

RECOMMENDATIONS:
6. The hospital shall provide documentation that the practitioner responsible for the Special Care Nursery has at least three years experience in all aspects of pediatric and neonatal respiratory therapy and completion of the neonatal/pediatric specialty examination of the National Board for Respiratory Care.

RECOMMENDATIONS:

7. Preventive services shall be designed to prevent, detect, diagnose and refer or treat conditions known to occur in the high-risk newborn, such as cerebral hemorrhage, visual defects (retinopathy of prematurity) and hearing loss, and to provide appropriate immunization of high-risk newborns.

RECOMMENDATIONS:

8. The hospital shall ensure that a person is designated to coordinate the local health department community nursing follow-up process, to direct discharge planning, to make home care arrangements, to track discharged patients, and to collect outcome information. The community nursing referral process shall consist of notifying the high-risk follow-up nurse in whose jurisdiction the patient resides. The Illinois Department of Human Services will identify and update referral resources for the area served by the unit.

RECOMMENDATIONS:

9. The hospital shall provide documentation that the Level II hospital with Extended Neonatal Capabilities has developed, with the assistance of the Administrative Perinatal Center, a referral agreement with a neonatal follow-up clinic to provide neurodevelopmental assessment and outcome data on the neonatal population. Institutional policies and procedures shall describe the at-risk population and referral procedure to be followed.

RECOMMENDATIONS:

10. The hospital shall ensure that if the Level II hospital with Extended Neonatal Capabilities transports neonatal patients, the hospital complies with Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians.

RECOMMENDATIONS:
To provide for assisted ventilation of newborn infants beyond immediate stabilization:

1. The hospital shall provide documentation that a pediatrician or advanced practice nurse, whose professional staff privileges granted by the hospital specifically include the management of critically ill infants and newborns receiving assisted ventilation, a pediatrician receiving post-graduate training in a neonatal-perinatal medicine fellowship program accredited by the Accreditation Council of Graduate Medical Education or an active candidate or board-certified neonatologist is present in the hospital the entire time that the infant is receiving assisted ventilation. If infants are receiving on-site assisted ventilation care from an advance practice nurse or a physician who is not a neonatologist, a board-certified neonatologist or active candidate neonatologist shall be available on call to assist in the care of those infants as needed.

RECOMMENDATIONS:

2. The hospital shall provide suitable backup systems and planning to prevent and respond appropriately to sudden power outage, oxygen system failure, and interruption of medical grade compressed air delivery.

RECOMMENDATIONS:

3. The hospital shall provide documentation that the nurses caring for infants who are receiving assisted ventilation have documented competence and experience in the care of such infants.

RECOMMENDATIONS:

4. The hospital shall provide documentation that the licensed respiratory care practitioner has documented competence and experience in the care of the infants who are receiving assisted ventilation and is also available to the Special Care Nursery during the entire time that the infant receives assisted ventilation.

RECOMMENDATIONS:

(Source: Added at 34 Ill. Reg. ______, effective ____________ )
Section 640. APPENDIX O  Level III Resource Checklist

Level III Resource Checklist

Briefly describe institutional compliance:

The Level III hospital shall provide all of the services outlined for Level I and Level II general, intermediate and special care, as well as diagnosis and treatment of high-risk pregnancy and neonatal problems. Both the obstetrical and neonatal services shall achieve Level III capability for Level III designation.

Level III General Provisions

1. The hospital shall provide documentation of participation in Continuous Quality Improvement (CQI) implemented by the Administrative Perinatal Center.

RECOMMENDATIONS:

2. The hospital shall provide documentation of health care provider participation in Joint Morbidity & Mortality Reviews.

RECOMMENDATIONS:

3. The hospital shall have the following clinical laboratory resources available:

Microtechniques for hematocrit and blood gases within 15 minutes; glucose, blood urea nitrogen (BUN), creatinine, blood gases, routine urine analysis, electrolytes and coagulation studies, complete blood count, routine blood chemistries, type & cross, Coombs test, bacterial smear within one hour; and capabilities for bacterial culture and sensitivity and viral culture.

RECOMMENDATIONS:

4. The hospital shall ensure that experienced radiology technicians are immediately available in the hospital with professional interpretation available 24 hours a day. Ultrasound capability shall be available 24 hours a day with additional ultrasound availability on the OB floor and staff knowledgeable in its interpretation.

RECOMMENDATIONS:
5. The hospital shall provide blood bank technicians immediately available in the hospital for blood banking procedures and identification of irregular antibodies. Blood components shall be readily available.

RECOMMENDATIONS:

6. The hospital shall ensure that personnel skilled in phlebotomy and IV placement in newborns are available 24 hours a day.

RECOMMENDATIONS:

Level III Standards

1. The Level III hospital shall provide documentation of a policy requiring health care professionals, in both obstetrics and pediatrics, to obtain consultation from or transfer of care to the maternal-fetal medicine or neonatology sub-specialists as outlined in the standards for Level II.

RECOMMENDATIONS:

2. The Level III hospital shall accept all medically eligible Illinois residents. Medical eligibility is to be determined by the obstetrical or neonatal director or his/her designee based on the Criteria for High-Risk Identification (Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians and Gynecologists).

RECOMMENDATIONS:

3. The Level III hospital shall provide or facilitate emergency transportation of patients referred to the hospital in accordance with guidelines for inter-hospital care of the perinatal patient (Guidelines for Perinatal Care, American Academy of Pediatrics and American College of Obstetricians and Gynecologists). If the Level III hospital is unable to accept the patient referred, the Administrative Perinatal Center shall arrange for placement at another Level III hospital or appropriate Level II or Level II hospital with Extended Neonatal Capabilities.

RECOMMENDATIONS:
NOTICE OF PROPOSED AMENDMENTS

4. The Level III hospital that elects not to provide all of the advanced level services shall have established policies and procedures for transfer of these mothers and infants to a hospital that can provide the service needed as outlined in the letter of agreement.

RECOMMENDATIONS:

5. The Level III hospital shall have a clearly identifiable telephone number, facsimile number and/or other electronic communication, either a special number or a specific extension answered by unit personnel, for receiving consultation requests and requests for admissions. This number shall be kept current with the Department and with the Regional Perinatal Network.

RECOMMENDATIONS:

6. The Level III hospital shall provide and document continuing education for medical, nursing, respiratory therapy, and other staff providing general, intermediate and intensive care perinatal services.

RECOMMENDATIONS:

7. The Level III hospital shall provide caesarean section decision-to-incision within 30 minutes.

RECOMMENDATIONS:

8. The hospital shall provide data relating to activities and shall comply with the requirements of the State Perinatal Reporting System.

RECOMMENDATIONS:

9. The medical co-directors of the Level III hospital shall be responsible for developing a system ensuring adequate physician-to-physician communication. Communication with referring physicians of patients admitted shall be sufficient to report patient progress before and at the time of discharge.

RECOMMENDATIONS:

10. The hospital shall provide documentation of the capability for continuous electronic maternal-fetal monitoring for patients identified at risk with staff available 24 hours a
day, including physicians and nursing, who are knowledgeable of electronic fetal monitoring use and interpretation. Staff shall complete a competence assessment in electronic maternal-fetal monitoring every two years.

RECOMMENDATIONS:__________________________

11. The Level III hospital, in collaboration with the Administrative Perinatal Center, shall establish policies and procedures for the return transfer of high-risk mothers and infants to the referring hospital when they no longer require the specialized care and services of the Level III hospital.

RECOMMENDATIONS:__________________________

12. The Level III hospital shall provide suitable backup systems and planning to prevent and respond to a sudden power outage, oxygen system failure, and interruption of medical grade compressed air delivery.

RECOMMENDATIONS:__________________________

13. The Level III hospital shall provide or develop a referral agreement with a follow-up clinic to provide neuro-developmental services for the neonatal population. Hospital policies and procedures shall describe the at-risk population and the referral procedure to be followed for enrolling the infant in developmental follow-up. Infants shall be scheduled for assessments at regular intervals. Neuro-developmental assessments shall be communicated to the primary physicians. Referrals shall be made for interventional care in order to minimize neurological sequelae. A system shall be established to track, record and report neuro-developmental outcome data for the population, as required to support network CQI activities.

RECOMMENDATIONS:__________________________

14. Neonatal surgical services shall be available 24 hours a day.

RECOMMENDATIONS:__________________________

Level III Resource Requirements

1. The Level III hospital shall provide documentation that obstetrical activities shall be directed and supervised by a full-time subspecialty obstetrician certified by the American
Board of Obstetrics and Gynecology in the subspecialty of maternal-fetal medicine or a licensed osteopathic physician with equivalent training and experience and certification by the American Osteopathic Board of Obstetricians and Gynecologists. The director of obstetric services shall ensure the back-up supervision of his or her services by a physician with equivalent credentials.

RECOMMENDATIONS:

2. The Level III hospital shall provide documentation that neonatal activities shall be directed and supervised by a full-time pediatrician certified by the American Board of Pediatrics Sub-Board of Neonatal/Perinatal Medicine or a licensed osteopathic physician with equivalent training and experience and certification by the American Osteopathic Board of Pediatricians/Neonatal-Perinatal Medicine. The director shall ensure the back-up supervision of his or her services by a physician with equivalent credentials.

RECOMMENDATIONS:

3. The Level III hospital shall provide documentation that an administrator/manager with a master's degree shall direct, in collaboration with the medical directors, the planning, development and operation of the non-medical aspects of the Level III hospital and its programs and services.

RECOMMENDATIONS:

4. The Level III hospital shall provide documentation that the obstetric and newborn nursing services are directed by a full-time nurse experienced in perinatal nursing with a master's degree.

RECOMMENDATIONS:

5. The Level III hospital shall provide documentation that half of all neonatal intensive care direct nursing care hours are provided by registered nurses who have had two years or more nursing experience in a Level III NICU. All NICU direct nursing care hours shall be provided or supervised by licensed registered nurses who have advanced neonatal intensive care training and documented competence in neonatal pathophysiology and care technologies used in the NICU. All nursing staff working in the NICU shall have yearly competence assessment in neonatal intensive care nursing.

RECOMMENDATIONS:
6. The Level III hospital shall provide documentation that obstetrical anesthesia services, under the supervision of a board-certified anesthesiologist with training in maternal, fetal and neonatal anesthesia, are available 24 hours a day. The director of obstetric anesthesia shall ensure the back-up supervision of his or her services when he or she is unavailable.

RECOMMENDATIONS:

7. The Level III hospital shall provide documentation that pediatric-neonatal respiratory therapy services are directed by a full time licensed respiratory care practitioner with a bachelor's degree.

RECOMMENDATIONS:

8. The Level III hospital shall provide documentation that the respiratory care practitioner responsible for the NICU has at least three years of experience in all aspects of pediatric and neonatal respiratory care at a Level III Neonatal Intensive Care Unit and completion of the neonatal/pediatrics specialty examination of the National Board for Respiratory Care.

RECOMMENDATIONS:

9. The Level III hospital shall provide documentation that respiratory care practitioners with experience in neonatal ventilatory care staff the NICU according to the respiratory care requirements of the patient population, with a minimum of one dedicated neonatal licensed respiratory care practitioner for newborns on assisted ventilation, and with additional staff provided as necessary to perform other neonatal respiratory care procedures.

RECOMMENDATIONS:

10. The Level III hospital shall provide documentation that a physician for the program assumes primary responsibility for initiating, supervising and reviewing the plan for management of distressed infants in the delivery room. Hospital policies and procedures shall assign responsibility for identification and resuscitation of distressed neonates to individuals who are both specifically trained and immediately available in the hospital at all times. Capability to provide neonatal resuscitation in the delivery room may be
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satisfied by current completion of a neonatal resuscitation program by medical, nursing and respiratory care staff or a rapid response team.

RECOMMENDATIONS:

11. The Level III hospital shall provide documentation that a board-certified or active candidate obstetrician is present and available in the hospital 24 hours a day. Maternal-fetal medicine consultation shall be available 24 hours a day.

RECOMMENDATIONS:

12. The Level III hospital shall provide documentation that a board-certified neonatologist, active candidate neonatologist or a pediatrician receiving postgraduate training in a neonatal-perinatal medicine fellowship program accredited by the Accreditation Council of Graduate Medical Education is present and available in the hospital 24 hours a day to provide care for newborns in the NICU.

RECOMMENDATIONS:

13. The Level III hospital shall provide documentation that neonatal surgical services are supervised by a board-certified surgeon or active candidate in pediatric surgery appropriate for the procedures performed at the Level III hospital.

RECOMMENDATIONS:

14. The Level III hospital shall provide documentation that neonatal surgical anesthesia services under the direct supervision of a board-certified anesthesiologist with extensive training or experience in pediatric anesthesiology are available 24 hours a day.

RECOMMENDATIONS:

15. The Level III hospital shall provide documentation that neonatal neurology services, under the direct supervision of a board-certified or active candidate pediatric neurologist, are available for consultation in the NICU 24 hours a day.

RECOMMENDATIONS:

16. The Level III hospital shall provide documentation that neonatal radiology services, under the direct supervision of a board-certified radiologist with extensive training or
experience in neonatal radiographic and ultrasound interpretation, are available 24 hours a day.

RECOMMENDATIONS:

17. The Level III hospital shall provide documentation that neonatal cardiology services, under the direct supervision of an active candidate pediatrician or a pediatrician board-certified by the American Board of Pediatrics Sub-Board of Pediatric Cardiology, are available for consultation 24 hours a day. In addition, cardiac ultrasound services and pediatric cardiac catheterization services by staff with specific training and experience shall be available 24 hours a day.

RECOMMENDATIONS:

18. The Level III hospital shall provide documentation that a board-certified or active candidate ophthalmologist with experience in the diagnosis and treatment of the visual problems of high-risk newborns (retinopathy of prematurity) is available for appropriate examinations, treatment and follow-up care of high-risk newborns.

RECOMMENDATIONS:

19. The Level III hospital shall provide documentation that pediatric sub-specialists with specific training and extensive experience or subspecialty board certification or active candidacy (when applicable) are available 24 hours a day, including, but not limited to, pediatric urology, pediatric otolaryngology, neurosurgery, pediatric cardiothoracic surgery and pediatric orthopedics appropriate for the procedures performed at the Level III hospital.

RECOMMENDATIONS:

20. The Level III hospital shall provide documentation that genetic counseling services are available for inpatients and outpatients, and the hospital shall provide for genetic laboratory testing, including, but not limited to, chromosomal analysis and banding, fluorescence in situ hybridization (FISH), and selected allele detection.

RECOMMENDATIONS:

21. The Level III hospital shall designate at least one person to coordinate the community nursing follow-up referral process, to direct discharge planning, to make home care
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arrangements, to track discharged patients, and to ensure appropriate enrollment in a developmental follow-up program. The community nursing referral process shall consist of notifying the follow-up nurse in whose jurisdiction the patient resides of discharge information on all patients. The Illinois Department of Human Services will identify and update referral resources for the area served by the unit.

RECOMMENDATIONS:

22. The Level III hospital shall establish a protocol that defines educational criteria necessary for commonly required home care modalities, including, but not limited to, continuous oxygen therapy, electronic cardio-respiratory monitoring, technologically assisted feeding and intravenous therapy.

RECOMMENDATIONS:

23. The Level III hospital shall provide documentation that one or more full-time licensed medical social workers with perinatal/neonatal experience are dedicated to the Level III hospital.

RECOMMENDATIONS:

24. The Level III hospital shall provide documentation that one registered pharmacist with experience in perinatal pharmacology is available for consultation on therapeutic pharmacology issues 24 hours a day.

RECOMMENDATIONS:

25. The Level III hospital shall provide documentation that one dietitian with experience in perinatal nutrition is available to plan diets and education to meet the special needs of high-risk mothers and neonates in both inpatient and outpatient settings.

RECOMMENDATIONS:

(Source: Added at 34 Ill. Reg. ______, effective ___________)
SECRETARY OF STATE

NOTICE OF PROPOSED AMENDMENT

1) Heading of the Part: Uniform Commercial Code

2) Code Citation: 14 Ill. Adm. Code 180

3) Section Number: Proposed Action:
   180.18 Amendment


5) Complete Description of the Subjects and Issues Involved: Section 180.18 (9) is amended, the word "AND", is converted to "&" and the "&" symbol is left the same. The results when searching "AND" and "&" will be identical.

6) Published studies or reports, and sources of underlying data, used to compose this rulemaking: Service Companies and Illinois Secretary of State

7) Will this rulemaking replace any emergency rulemaking currently in effect? No

8) Does this rulemaking contain an automatic repeal date? No

9) Does this rulemaking contain incorporations by reference? No

10) Are there any other proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives: This rulemaking will not affect units of local government.

12) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Written comments may be submitted within 45 days to:

   Michelle Nijm, Assistant General Counsel
   Illinois Secretary of State
   Office of the General Counsel
   100 W Randolph St., Suite 5-400
   Chicago, IL 60601
   312/814-7246
NOTICE OF PROPOSED AMENDMENT

13) Initial Regulatory Flexibility Analysis:

   A) Types of small businesses, small municipalities an not for profit corporations affected: None

   B) Reporting, bookkeeping or other procedures required for compliance: None

   C) Types of professional skills necessary for compliance: None

14) Regulatory Agenda on which this rulemaking was summarized: January 2010

The full text of the Proposed Amendment begins on the next page:
Section 180.18  Search Requests and Reports

General requirements. The filing officer maintains for public inspection a searchable index for all records of UCC documents. The index shall provide for the retrieval of a record by the name of the debtor and by the file number of the initial financing statement of each filed UCC record relating to the initial financing statement.

a) Search requests. Search requests shall contain the following information:
NOTICE OF PROPOSED AMENDMENT

1) Name searched. A search request should set forth the name of the debtor to be searched and must specify whether the debtor is an individual or an organization. A search request will be processed using the name in the exact form it is submitted. Each search request shall be limited to one debtor name.

2) Requesting party. The name and address of the person to whom the search report is to be sent.

3) Fee. The appropriate fee shall be enclosed, payable by a method described in Section 180.13 of this Part.

4) Search request with filing. If a filer requests a search at the time a UCC record is filed, a UCC-11 form designating the exact debtor name from the initial financing statement shall be submitted. The requesting party shall be the name and address to whom the search report should be sent, and the search request shall be deemed to request a search that would retrieve all financing statements filed on or prior to the date the UCC record is filed. The filer shall submit the search request on a UCC-11 form.

b) Rules applied to search requests. Search results are produced by the application of standardized search logic to the name presented to the filing officer. Human judgment does not play a role in determining the results of the search. The following rules apply to searches:

1) There is no limit to the number of matches that may be returned in response to the search criteria.

2) No distinction is made between upper and lower case letters.

3) Punctuation marks and accents are disregarded.

4) Words and abbreviations at the end of a name that indicate the existence or nature of an organization as set forth in the "Ending Noise Words" list as promulgated and adopted by the International Association of Commercial Administrators are disregarded. Such words include, but are not limited to, the following:
SECRETARY OF STATE

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<tr>
<td>Inc</td>
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<td></td>
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</table>

5) The word "the" if used anywhere in the search criteria is disregarded.

6) All spaces are disregarded.

7) For first and middle names of individuals, initials are treated as the logical equivalent of all names that begin with such initials, and first name and no middle name or initial is equated with all middle names and initials. For example, a search request for "John A. Smith" would cause the search to retrieve all filings against all individual debtors with "John" or the initial
"J" as the first name, "Smith" as the last name, and with the initial "A" or any name beginning with "A" in the middle name field. If the search were for "John Smith" (first and last names with no designation in the middle name field), the search would retrieve all filings against individual debtors with "John" or the initial "J" as the first name, "Smith" as the last name and with any name or initial or no name or initial in the middle name field.

8) After using the preceding rules to modify the name to be searched, the search will reveal only names of debtors that are contained in unlapsed financing statements and exactly match the name requested, as modified.

9) The word “AND” is converted to “&” and the “&” symbol is left the same. The results searching "AND" and "&" will be identical.

c) Optional information. A UCC search request may contain any of the following information:

1) The request may limit the records requested by limiting them by the address of the debtor, the city of the debtor, the date of filing (or a range of filing dates) on the financing statements. A report created by the filing officer in response to such a request shall contain the statement "A limited search may not reveal all filings against the debtor searched and the searcher bears the risk of relying on such a search".

2) The request may ask for copies of UCC records identified on the primary search response.

3) Instructions on the mode of delivery desired, if other than by ordinary mail, which will be honored if the requested mode is available to the filing office.

4) UCC or Federal Tax Lien Search Requests. All information requests submitted on a UCC-11 Information Request Form will be assumed to be a UCC information search unless otherwise identified as a Federal Tax Lien search. Only one type of search may be requested per form. A separate fee and form are required for each search requested.

d) Search responses. Reports created in response to a search request shall include the following:
NOTICE OF PROPOSED AMENDMENT

1) Filing officer. Identification of the filing officer and the certification of the filing officer required by law.

2) Report date. The date the report was generated.

3) Name searched. Identification of the name searched.

4) Certification date. The certification date and time for which the search is effective.

5) Identification of initial financing statements. Identification of each unexpired initial financing statement filed on or prior to the certification date and time corresponding to the search criteria, by name of debtor, by identification number, and by file date and file time.

6) History of financing statement. For each initial financing statement on the report, a listing of all related UCC records filed by the filing officer on or prior to the certification date.

7) Copies. Copies of all UCC records revealed by the search and requested by the searcher.

8) Extensive search requests. The filing officer will need additional time to process any information or search request that is in excess of 100 pages in length due to system limitations for printing lengthy search requests as described under the provisions of 810 ILCS 5/9-524(1) and (2).

(Source: Amended at 34 Ill. Reg. ______, effective ____________)
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

NOTICE OF PROPOSED AMENDMENTS

1) **Heading of the Part**: The Administration and Operation of the Teachers' Retirement System

2) **Code Citation**: 80 Ill. Adm. Code 1650

3) **Section Numbers**: Proposed Action:
   - 1650.3000 New
   - 1650.3005 New
   - 1650.3010 New
   - 1650.3015 New
   - 1650.3020 New
   - 1650.3025 New
   - 1650.3030 New
   - 1650.3035 New
   - 1650.3040 New
   - 1650.3045 New

4) **Statutory Authority**: Implementing and authorized by Articles 1 and 16 of the Illinois Pension Code [40 ILCS 5/Art. 1 and 40 ILCS 5/Art 16]

5) **A Complete Description of the Subjects and Issues Involved**: Public Act 96-6, 40 ILCS 5/1-113.14(b), requires Illinois retirement systems, including the Teachers' Retirement System of the State of Illinois (TRS), to adopt a policy for procurement of investment services. The TRS investment policy provides detailed standards and procedures concerning all aspects of the System's investment program. The purpose of the proposed rules is to provide all interested parties and the public at large with detailed information about the System's investment process. The proposed new **Competitive Selection Procedures for Investment Services** provide step-by-step information about the System's investment manager and consultant search process. The rules explain the investment manager database, how to participate in the emerging manager program, and how to be considered in searches for consultants, public market, small and mid cap equity, and real estate separate account asset classes.

6) **Published studies or reports, and sources of underlying data**, used to compose this rulemaking: None

7) **Will this rulemaking replace any emergency rulemaking currently in effect?** No

8) **Does this rulemaking contain an automatic repeal date?** No
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

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9) Does this rulemaking contain incorporations by reference? No

10) Are there any other rulemakings pending on this Part? Yes

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<th>Illinois Register Citation:</th>
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11) Statement of Statewide Policy Objectives: This rulemaking does not create or expand a State mandate under the State Mandates Act [30 ILCS 805]

12) Time, Place, and Manner in which interested persons may comment on this proposed rulemaking: Comments on the proposed amendment may be submitted in writing for a period of 45 days following publication of this Notice to:

Cynthia M. Fain  
Sr. Asst. General Counsel  
Teachers' Retirement System  
2815 West Washington,  
P. O. Box 19253  
Springfield, Illinois 62794-9253  
217/753-0375

13) Initial Regulatory Flexibility Analysis: These rules will not affect small businesses.

A) Types of small businesses, small municipalities and not for profit corporations affected: None
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

NOTICE OF PROPOSED AMENDMENTS

B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

14) Regulatory Agenda on which this rulemaking was summarized: These rules were not summarized on a previous Regulatory Agenda.

The full text of the Proposed Amendments begins on the next page:
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

NOTICE OF PROPOSED AMENDMENTS

TITLE 80: PUBLIC OFFICIALS AND EMPLOYEES
SUBTITLE D: RETIREMENT SYSTEMS
CHAPTER III: TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

PART 1650
THE ADMINISTRATION AND OPERATION OF THE
TEACHERS' RETIREMENT SYSTEM

SUBPART A: REPORTS BY BOARD OF TRUSTEES

Section
1650.10 Annual Financial Report (Repealed)

SUBPART B: BASIC RECORDS AND ACCOUNTS

Section
1650.110 Membership Records
1650.120 Claims Records (Repealed)
1650.130 Individual Accounts (Repealed)
1650.140 Ledger and Accounts Books (Repealed)
1650.150 Statistics (Repealed)
1650.160 Confidentiality of Records
1650.180 Filing and Payment Requirements
1650.181 Early Retirement Incentive Payment Requirements (Repealed)
1650.182 Waiver of Additional Amounts Due
1650.183 Definition of Employer's Normal Cost

SUBPART C: FILING OF CLAIMS

Section
1650.201 Disability Benefits – Application Procedure; Effective Date
1650.202 Disability Benefits – Definitions
1650.203 Disability Retirement Annuity – Definitions
1650.204 Gainful Employment – Consequences
1650.205 Medical Examinations and Investigation of Disability Claims
1650.206 Physician Certificates
1650.207 Disability Due to Pregnancy
1650.208 Disability Payments
1650.209 Computation of Annual Salary When Member Has Different Semester Salary
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Rates (Repealed)
1650.210 Claim Applications
1650.211 Disability Recipient Eligible to Receive an Age or Disability Retirement Annuity
1650.220 Reclassification of Disability Claim (Repealed)
1650.221 When Member Becomes Annuitant
1650.222 Death Out of Service
1650.230 Medical Examinations and Investigations of Claims (Repealed)
1650.240 Refunds; Canceled Service; Repayment
1650.250 Death Benefits
1650.260 Evidence of Age
1650.270 Reversionary Annuity – Evidence of Dependency
1650.271 Evidence of Parentage
1650.272 Eligible Child Dependent By Reason of a Physical or Mental Disability
1650.280 Evidence of Marriage
1650.290 Offsets

SUBPART D: MEMBERSHIP AND SERVICE CREDITS

Section
1650.301 Early Retirement Without Discount – Return to Teaching from a Break in Service
1650.310 Effective Date of Membership
1650.315 Verifying Service Credit
1650.320 Method of Calculating Service Credits
1650.325 Method of Calculating Service Credit for Recipients of a Disability Benefit or Occupational Disability Benefit
1650.330 Duplicate Service Credit
1650.335 Unreported Regular Service Credit and Earnings
1650.340 Service Credit for Leaves of Absence
1650.341 Service Credit for Involuntary Layoffs
1650.345 Service Credit for Periods Away From Teaching Due to Pregnancy
1650.346 Service Credit for Periods Away From Teaching Due to Adoption
1650.350 Service Credit for Unused Accumulated Sick Leave Upon Retirement
1650.351 Employer Contribution for Excess Sick Leave
1650.355 Purchase of Optional Service – Required Minimum Payment
1650.356 Payroll Deduction Program (Repealed)
1650.357 Employer Payment of Member’s Optional Service and/or Upgrade Contribution Balance (Repealed)
1650.360 Settlement Agreements and Judgments
1650.370 Calculation of Average Salary (Renumbered)
TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

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1650.380 Definition of Actuarial Equivalent (Repealed)
1650.390 Independent Contractors
1650.391 Optional 2.2 Upgrade of Earned and Credited Service
1650.392 2.2 Upgrade of Optional Service Not Credited at Initial Upgrade

SUBPART E: CONTRIBUTION CREDITS AND PAYMENTS

Section
1650.410 Return of Contributions for Duplicate or Excess Service
1650.415 Return of Optional Increase in Retirement Annuity Contributions
1650.416 Optional Increase in Retirement Annuity – 1% Contribution Reduction
1650.417 Mandatory Distributions Pursuant to Section 401(a)(9) of the Internal Revenue Code
1650.420 Interest on Deficiencies (Repealed)
1650.430 Installment Payments (Repealed)
1650.440 Small Deficiencies, Credits or Death Benefit Payments (Repealed)
1650.450 Compensation Recognized As "Salary"
1650.451 Reporting of Conditional Payments
1650.460 Calculation of Average Salary
1650.470 Rollover Distributions
1650.480 Rollovers to the System
1650.481 Employer Contribution Required for Salary Increases in Excess of 6%
1650.482 Contracts and Collective Bargaining Agreements – Loss of Exemption from Employer Contributions
1650.483 Employer Contributions for Salary Increases in Excess of 6% and Excess Sick Leave Exemption from Contributions
1650.484 Members Not Covered by Collective Bargaining Agreements or Employment Contracts
1650.485 Employer Contributions for Salary Increases in Excess of 6% – Receipt of Bill

SUBPART F: ANNUITANTS AND BENEFICIARIES

Section
1650.505 Beneficiary (Repealed)
1650.510 Re-entry Into Service (Repealed)
1650.520 Suspension of Benefits
1650.530 Power of Attorney
1650.540 Conservators/Guardians
1650.550 Presumption of Death
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1650.560 Benefits Payable on Death
1650.561 Valid Beneficiary Designations
1650.570 Survivors' Benefits
1650.571 Payment of Monthly Survivor Benefits to a Trust
1650.575 Full-time Student – Receipt of Survivors Benefits Until Age 22
1650.580 Evidence of Eligibility
1650.590 Comptroller Offset
1650.595 Overpayments

SUBPART G: ATTORNEY GENERAL'S OPINION

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1650.605 Policy of the Board Concerning Attorney Generals' Opinion (Repealed)

SUBPART H: ADMINISTRATIVE REVIEW

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1650.620 Right of Appeal
1650.630 Form of Written Request
1650.635 Presiding Hearing Officer – Duties and Responsibilities
1650.640 Prehearing Procedure
1650.641 Claims Hearing Committee Hearing Packet
1650.650 Hearing Procedure
1650.660 Rules of Evidence (Repealed)

SUBPART I: AMENDMENTS TO BYLAWS AND RULES

Section
1650.710 Amendments

SUBPART J: RULES OF ORDER

Section
1650.810 Parliamentary Procedure

SUBPART K: FREEDOM OF INFORMATION ACT REQUESTS

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TEACHERS' RETIREMENT SYSTEM OF THE STATE OF ILLINOIS

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1650.910 Summary and Purpose
1650.920 Definitions
1650.930 Submission of Requests
1650.940 Form and Content of FOIA Requests
1650.950 Appeal of a Denial
1650.960 Executive Director's Response to Appeal
1650.970 Response to FOIA Requests
1650.980 Inspection of Records at System Office
1650.990 Copies of Public Records
1650.995 Materials Available Under Section 4 of FOIA

SUBPART L: BOARD ELECTION PROCEDURES

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1650.1001 Elections Date/Election Day – Defined
1650.1010 Petitions
1650.1020 Eligible Voters
1650.1030 Election Materials
1650.1040 Marking of Ballots
1650.1050 Return of Ballots
1650.1060 Observation of Ballot Counting
1650.1070 Certification of Ballot Counting
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AUTHORITY: Implementing and authorized by Articles 1 and 16 of the Illinois Pension Code
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[40 ILCS 5/Arts. 1 and 16]; Freedom of Information Act [5 ILCS 140]; Internal Revenue Code (26 USC 1 et seq.); Section 5-15 of the Illinois Administrative Procedure Act [5 ILCS 100/5-15].


SUBPART P: COMPETITIVE SELECTION PROCEDURES
FOR INVESTMENT SERVICES
Section 1650.3000 Summary and Purpose

This Subpart P implements the provisions of Public Act 96-6 to ensure investment transparency and objective consideration of potential investment managers and consultants, as authorized by the Illinois Pension Code [40 ILCS 5/1-113.14]. Procurement of all investment services by the Teachers' Retirement System of the State of Illinois is conducted in accordance with the competitive selection procedures set forth in this Subpart.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3005 Definitions

a) The definitions in Articles 1 and 16 of the Illinois Pension Code [40 ILCS 5/Arts. 1 and 16] apply to this Subpart.

b) The definition of "investment services" in the Illinois Pension Code [40 ILCS 5/1-113.14(a)] applies to this Subpart.

c) "System" means the Teachers' Retirement System of the State of Illinois.

d) "Consultant" means the independent investment consulting firm or firms contractually engaged by the System to provide general or specialty investment consulting services for the prudent administration of the System's investment portfolio.

e) "Board" means the Board of Trustees of the Teachers' Retirement System of the State of Illinois.

f) "Investment Committee" means the investment committee of the Board of Trustees of the Teachers' Retirement System of the State of Illinois.

g) "Manager Database" means an industry database of institutional quality registered investment management firms utilized by the consultant as described in Section 1650.3010.

h) "PEOC" means the internal Staff Private Equity Oversight Committee.

i) "PMOC" means the internal Staff Public Market Oversight Committee.
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j) "REOC" means the internal Staff Real Estate Oversight Committee.

k) "Staff" means the professional investment staff of the Teachers' Retirement System responsible for the applicable asset class.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3010 Manager Database

a) The consultant will make use of an industry database (Manager Database) containing institutional quality firms that are registered investment managers. No fee is required to participate in the Manager Database.

b) The Manager Database serves as the primary pool from which the System identifies candidates for public market investment manager searches.

c) To be considered in a public market search, all interested investment managers not currently in the Manager Database should ensure that all required information has been submitted to the Manager Database prior to the screening dates specified in the candidate profiles described in Sections 1650.3020 and 1650.3025.

d) The consultant's contact information is available on the TRS web site (trs.illinois.gov).

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3015 Emerging Investment Managers

a) The System's emerging managers program is broadly available across all asset classes. Any firm interested in participating in the emerging managers program may submit the questionnaire provided on the TRS web site (trs.illinois.gov). All responses are reviewed by staff and included in the System's emerging manager database.

b) Any candidate meeting the definition of "emerging investment manager" as defined in the Illinois Pension Code [40 ILCS 5/1-109.1(4)] or any promising younger, growing investment manager that currently has smaller asset bases and
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developing track records, and meeting the minimum criteria for a related search, is invited to meet with staff to discuss its product.

c) Based on the results of the meetings, staff selects semi-finalist firms that appear to have the highest probability of success over the next three to five years.

d) Staff and the consultant conduct in-person interviews of semi-finalist firms at the System's offices or alternate location agreed upon by the System and the firm. Semi-finalists must be approved by the applicable staff oversight committee (PMOC, PEOC or REOC).

e) Following favorable results of the in-person interviews, staff identifies finalist firms for on-site due diligence at the candidate firm's offices. On-site visits and finalist recommendations must be approved by the applicable staff oversight committee.

f) After on-site due diligence is completed, staff initiates fee and contract negotiations with the finalist firms. All contracts and related documentation relative to hiring an investment manager must be negotiated in final form prior to Investment Committee consideration.

g) Any finalist firm that successfully passes due diligence review and fee and contract negotiations is presented to the Investment Committee for consideration.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3020 Public Market Searches

a) The Board authorizes every search for a new or replacement public market investment mandate (excluding small and mid cap equities; see Section 1650.3025) by recorded vote of the Board in a business meeting conducted in accordance with the Open Meetings Act [5 ILCS 120].

b) The Board's vote authorizing a search is reported in the System's press release issued to the financial press and posted on the TRS web site (trs.illinois.gov) as soon as possible and no later than two business days following conclusion of the Board meeting.
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c) Following Board authorization, staff, working with the consultant, prepares a written candidate profile that lists specific requirements for each search. The candidate profile identifies specific quantitative and qualitative factors, such as:

1) Minimum assets under management;
2) Minimum track record;
3) Risks relative to benchmarks;
4) Return relative to benchmarks over various time periods;
5) Size and tenure of professional staff;
6) Investment strategy and process; and
7) Organizational stability and strength.

d) The candidate profile is posted on the TRS web site to allow any interested candidate to review the search criteria.

e) The candidate profile identifies a specific screening period during which the consultant will screen the Manager Database to identify all managers meeting the criteria of the candidate profile.

f) During the screening period identified in the candidate profile, staff and the consultant identify and rank all candidates in the Manager Database that meet the quantitative criteria specified in the candidate profile.

Staff and the consultant review the candidate list to eliminate any managers that fail to meet qualitative screens.

Staff and the consultant further refine the candidate list to identify semi-finalist firms that, based on criteria in the candidate profile, appear to have the highest probability of success over the next three to five years. In the event more information is necessary to narrow the semi-finalist list, a standardized Request for Information (RFI) may be issued to the pool of eligible semi-finalists to facilitate further in-depth analysis by staff and the consultant. Semi-finalists in this case are selected from the RFI submissions.
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i) Staff conducts in-person interviews of semi-finalist firms at the System's offices or alternate location agreed upon by the System and the firm. Semi-finalists must be approved by the PMOC.

j) Following favorable results of the in-person interviews, staff identifies finalist firms for formal due diligence meetings, typically at the candidate firm's offices. Due diligence meetings and finalist recommendations must be approved by the PMOC. If any eligible emerging managers, as defined in the Illinois Pension Code [40 ILCS 5/1-119.1(4)], meet the minimum criteria of the search, the most qualified emerging candidate will be invited to present as a finalist to the Investment Committee at its next scheduled meeting allowing sufficient time on the meeting agenda.

k) After due diligence is completed, staff initiates fee and contract negotiations with the finalist firms. All contracts and related documentation relative to hiring an investment manager must be negotiated in final form prior to Investment Committee consideration.

l) Any finalist firm that successfully passes due diligence review and fee and contract negotiations is presented to the Investment Committee for consideration.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3025 Small and Mid Cap Equity Searches

a) The Board has authorized and directed staff to continuously monitor the investment manager universe for attractive small and mid cap public equity candidates. Staff and the consultant formally screen the full manager universe on a semi-annual basis following the end of each fiscal and calendar year.

b) Staff, working with the consultant, has prepared a written candidate profile that lists specific requirements for small and mid cap public equity candidates. The candidate profile identifies specific quantitative and qualitative factors, such as:

1) Minimum assets under management;

2) Minimum track record;
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3) Risks relative to benchmarks;
4) Return relative to benchmarks over various time periods;
5) Size and tenure of professional staff;
6) Investment strategy and process; and
7) Organizational stability and strength.

c) The candidate profile is continuously posted on the TRS web site (trs.illinois.gov) to allow any interested candidate to review the search criteria.

d) The candidate profile identifies a specific screening period during which the consultant will screen the Manager Database to identify all managers meeting the criteria of the candidate profile.

e) During the screening period identified in the candidate profile, Staff and the Consultant identify and rank all candidates in the Manager Database that meet the quantitative criteria specified in the candidate profile.

f) Staff and the consultant review the candidate list to eliminate any managers that fail to meet qualitative screens.

g) Staff and the consultant further refine the candidate list to identify firms that, based on criteria in the candidate profile, appear to have the highest probability of success over the next three to five years. In the event more information is necessary to narrow the semi-finalist list, a standardized Request for Information (RFI) may be issued to the pool of eligible semi-finalists to facilitate further in-depth analysis by staff and the consultant. Semi-finalists in this case are selected from the RFI submissions.

h) Staff and the consultant conduct in-person interviews of semi-finalist firms at the System's offices or alternate location agreed upon by the System and the firm. Semi-finalists must be approved by the PMOC.

i) Following favorable results of the in-person interviews, Staff identifies finalist firms for formal due diligence meetings, typically at the candidate firm's offices.
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Due diligence meetings and finalist recommendations must be approved by the PMOC.

j) After due diligence is completed, staff initiates fee and contract negotiations with the finalist firms. All contracts and related documentation relative to hiring an investment manager must be negotiated in final form prior to Investment Committee consideration.

k) Any finalist firm that successfully passes due diligence review and fee and contract negotiations is presented to the Investment Committee for consideration.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3030 Private Market and Commingled Fund Searches

a) Funds and managers are opportunistically reviewed as they are available in the private market based on the System's annual private equity and real estate tactical plans and quality of the fund's or manager's team, process and strategy.

b) Staff, working with the consultants, prepares a private equity tactical plan and a real estate tactical plan for presentation to the Investment Committee at the beginning of each fiscal year. The annual tactical plans establish allocation targets for opportunistic investments within the private markets asset classes for the upcoming year.

c) Summaries of the System's annual tactical plans are posted on the TRS web site (trs.illinois.gov) following Board approval. Investment focus for the fiscal year is specified in the annual tactical plan summaries for all interested funds and managers to review.

d) Funds and managers interested in participating in the System's private market program and meeting the investment focus specified in the annual tactical plan may identify themselves to the System or the consultants via email, as instructed on the TRS web site.

e) Over the course of the tactical plan period, Staff reviews all information received from funds and managers that best position the System's investment portfolio for its intended strategic allocation targets.
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f) Staff eliminates any investment opportunities that fail to meet the System’s qualitative requirements and/or do not fit into a strategic allocation defined in the annual tactical plan.

g) Any fund or manager meeting the criteria set forth in the annual tactical plan and deemed to be a complimentary fit to the portfolio is invited to interview with staff in person or via conference call. Any decision to interview a prospective fund or manager must be approved by the applicable staff oversight committee (PEOC or REOC).

h) Following favorable interview results and staff research into the fund offering or manager, the fund or manager is asked to complete the System’s standardized comprehensive due diligence questionnaire. Any recommendation to send the due diligence questionnaire must be approved by the applicable staff oversight committee.

i) Following favorable results of the completed due diligence questionnaire, staff proceeds with formal due diligence meetings, typically at the candidate firm’s offices. Any recommendation for due diligence meetings must be approved by the applicable staff oversight committee.

j) After due diligence is completed, staff initiates fee and contract negotiations with the finalist firm. All contracts and related documentation relative to hiring a fund or manager must be negotiated in final form prior to Investment Committee consideration.

k) Any finalist firm that successfully passes due diligence review and fee and contract negotiations is presented to the Investment Committee for consideration.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3035 Private Market Real Estate Separate Account Searches

a) Real estate separate account managers are opportunistically reviewed as they are available in the market based on the System’s annual real estate tactical plan and quality of the manager’s team, process and strategy.

b) Staff, working with the consultant, prepares a real estate tactical plan for presentation to the Investment Committee at the beginning of each fiscal year.
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The annual real estate tactical plan establishes the search criteria, investment strategy and allocation targets.

c) A real estate tactical plan summary is posted on the TRS web site (trs.illinois.gov) following Board approval. Search criteria for the fiscal year are listed in the real estate tactical plan summary for all interested managers to review.

d) Managers interested in participating in the System's real estate program and meeting the criteria specified in the annual real estate tactical plan may identify themselves to the System or the consultant via email, as instructed on the TRS web site.

e) Over the course of the real estate tactical plan period, staff reviews all information received from managers that best position the System's investment portfolio for its intended strategic allocation targets.

f) Staff eliminates any investment opportunities that fail to meet the System's qualitative requirements and/or do not fit into a strategic allocation defined in the annual real estate tactical plan.

g) Any manager meeting the criteria set forth in the annual real estate tactical plan and deemed to be a complimentary fit to the portfolio is invited to interview with staff in person or via conference call. Any decision to interview a prospective manager must be approved by the REOC.

h) Following favorable results of interview and staff research, the manager is asked to complete the System's standardized comprehensive due diligence questionnaire. Any recommendation to send the due diligence questionnaire must be approved by the REOC.

i) Following favorable results of the completed due diligence questionnaire, staff proceeds with formal due diligence meetings, typically at the candidate firm's offices. Any recommendation for due diligence meetings must be approved by the REOC.

j) After due diligence is completed, staff initiates fee and contract negotiations with the finalist firm. All contracts and related documentation relative to hiring a manager must be negotiated in final form prior to Investment Committee consideration.
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k) Any finalist firm that successfully passes due diligence review and fee and contract negotiations is presented to the Investment Committee for consideration.

(Source: Added at 34 Ill. Reg. ______, effective ______________)

Section 1650.3040 Consultant Searches

a) The Board authorizes every search for a new or replacement consultant to provide general or specialty investment consulting services to the System by recorded vote of the Board in a business meeting conducted in accordance with the Open Meetings Act [5 ILCS 120].

b) The Board's vote authorizing a search is reported in the System's press release issued to the financial press and posted on the TRS web site (trs.illinois.gov) as soon as possible and no later than two business days following conclusion of the Board meeting.

c) Following Board authorization, staff prepares a Request for Proposal (RFP) containing the following information:

1) The type of services required;

2) An estimate of when and for how long the services will be required;

3) The contract to be used;

4) The date and time by which proposals must be submitted; and

5) A statement of the information the proposal must contain.

d) The RFP is posted on the TRS web site to allow any interested candidate to review the search criteria. The RFP notice posted on the TRS Web site summarizes the services sought, tells how and where to submit proposals, specifies the deadline for submitting proposals, and tells when and where proposals will be publicly opened and how to obtain paper copies of the RFP.

e) Proposals submitted in response to an RFP must comply with all requirements set forth in the RFP and submitted within the time frame specified in the RFP.
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Proposals are date and time stamped upon receipt. Proposals that arrive late for any reason will not be considered.

f) Proposals are publicly opened at the date and time specified on the TRS web site. Staff reviews all proposals timely received to ensure all required information is included. Proposal information is publicly available following execution of a contract with the successful firm.

g) Staff identifies and ranks all proposals meeting all minimum qualifications specified in the RFP to identify semi-finalist firms.

h) Staff conducts in-person interviews of semi-finalist firms at the System’s offices or alternate location agreed upon by the System and the firm.

i) Following favorable results of the in-person interviews, staff identifies finalist firms for formal due diligence meetings, typically at the candidate firm’s offices.

j) After due diligence is completed, staff initiates fee and contract negotiations with finalist firms. All contracts and related documentation relative to hiring a consultant must be negotiated in final form prior to Investment Committee consideration. Contracts for consultant services may not exceed five years in duration.

k) Any finalist firm that successfully passes due diligence review and fee and contract negotiations is presented to the Investment Committee for consideration.

(Source: Added at 34 Ill. Reg. ______, effective ____________)

Section 1650.3045 Evaluation by Investment Committee

a) The Investment Committee ensures that the decision and process to hire a particular investment manager or consultant, or to approve a specific investment, is well-reasoned, thoroughly considered and prudent.

b) The Investment Committee reviews written supporting documentation to assure the greatest possible disclosure of all relevant issues; that the search process, investment sourcing and related due diligence was fair; and that the screening process was consistently applied.
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c) Upon approval by the Investment Committee, any recommendation to hire a particular investment manager or consultant, or to approve a specific investment, is submitted to the Board for decision.

(Source: Added at 34 Ill. Reg. _______, effective _____________)
DEPARTMENT OF TRANSPORTATION

NOTICE OF PROPOSED AMENDMENT

1) **Heading of the Part:** Roadside Memorials

2) **Code Citation:** 92 Ill. Adm. Code 549

3) **Section Number:** 549.500  
   **Proposed Action:** Amend

4) **Statutory Authority:** Implementing, and authorized by Section 25 of the Roadside Memorial Act [605 ILCS 125] and Sections 27.5 and 27.6 of The Clerk of Courts Act [705 ILCS 105/27.5 and 27.6] and Section 5-9-1.17 of The Unified Code of Corrections [730 ILCS 5/5-9-1.17]. (See P.A. 96-667, effective August 25, 2009.)

5) **A Complete Description of the Subjects and Issues Involved:** This Part provides for the placement of roadside markers to commemorate the deaths of persons killed in crashes involving impaired drivers. The purpose of the program is to raise public awareness of impaired driving by emphasizing the dangers while affording families an opportunity to remember the victims. The authorizing statute provides that the Department may place markers with the message, "Please Don't Drink and Drive", along with a plaque bearing the name of the victim and the date of the crash, at the location of the crash or at an alternate location.

   By this proposed rulemaking, the Department is amending Section 549.500 for consistency with P.A. 96-667 that provides that a person who is convicted or receives a disposition of court supervision for a violation of certain DUI provisions under the Illinois Vehicle Code shall, in addition to any other disposition, penalty, or fine imposed, pay a fee of $50 which shall be deposited into the Roadside Memorial Fund. The Public Act also provides that, subject to appropriation, all money in the Roadside Memorial Fund shall be used by the Department to pay fees for DUI memorial markers under the Roadside Memorial Act and that money in the Roadside Memorial Fund shall not be used for any other purpose.

6) **Published studies or reports, and sources of underlying data, used to compose this rulemaking:** None

7) **Will this rulemaking replace any emergency rulemaking currently in effect?** No

8) **Does this rulemaking contain an automatic repeal date?** No

9) **Does this rulemaking contain incorporations by reference?** No
DEPARTMENT OF TRANSPORTATION

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10) Are there any proposed rulemakings pending on this Part? No

11) Statement of Statewide Policy Objectives: The law allows, but does not require, local agencies to have similar programs on streets and highways under their respective jurisdictions.

12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking: Any interested party may submit written comments or arguments concerning this proposed amendment. Written submissions shall be filed with:

Mr. Aaron Weatherholt, Acting Engineer of Operations
Illinois Department of Transportation
Division of Highways
2300 South Dirksen Parkway, Room 009
Springfield, Illinois  62764

217/782-2076

JCAR requests, comments and concerns regarding this rulemaking should be addressed to:

Ms. Christine Caronna-Beard, Rules Manager
Illinois Department of Transportation
Office of Chief Counsel
2300 South Dirksen Parkway, Room 317
Springfield, Illinois  62764

217/524-3838

Comments received within forty-five days after the date of publication of this Illinois Register will be considered. Comments received after that time will be considered, time permitting.

13) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not for profit corporations affected: This rulemaking will have no effect on small businesses.
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B) Reporting, bookkeeping or other procedures required for compliance: None

C) Types of professional skills necessary for compliance: None

14) Regulatory Agenda on which this rulemaking was summarized: January 2010

The full text of the Proposed Amendment begins on the next page:
DEPARTMENT OF TRANSPORTATION

NOTICE OF PROPOSED AMENDMENT

TITLE 92: TRANSPORTATION
CHAPTER I: DEPARTMENT OF TRANSPORTATION
SUBCHAPTER f: HIGHWAYS

PART 549
ROADSIDE MEMORIALS

Section
549.100 Introduction
549.200 Definitions
549.300 Criteria for DUI Memorial Markers and Commemorative Plaques
549.400 Design of DUI Memorial Markers and Commemorative Plaques
549.500 Application, Fees and Other Regulations
549.APPENDIX A District Offices and Counties

AUTHORITY: Implementing, and authorized by, Section 25 of the Roadside Memorial Act [605 ILCS 125] and Sections 27.5 and 27.6 of the Clerk of Courts Act [705 ILCS 105/27.5 and 27.6] and Section 5-9-1.17 of the Unified Code of Corrections [730 ILCS 5/5-9-1.17].


Section 549.500 Application, Fees and Other Regulations

a) Application

1) Application forms for the placement of DUI memorial markers and commemorative plaques will be available from the Department (see Section 549.Appendix A for a listing of District addresses and phone numbers). If a qualifying relative wishes to participate in the program, he/she must complete an application form for each victim he/she wishes to commemorate and submit it to the Department at the address shown in Section 549.Appendix A for the county in which the marker is desired.

2) When the Department determines from the initial application that the criteria listed in this Part are met, the application will be approved and a copy returned to the qualifying relative, along with instructions concerning payment of the fee and other appropriate information.
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b) Fees

1) **Except as provided in subsection (b)(4),** a one-time fee sufficient to offset the cost of the program will be charged **to the qualifying relative** for each DUI memorial marker and commemorative plaque installed by the Department. The fees, as of January 1, 2008, will be $150 for each DUI memorial marker and $50 for each commemorative plaque. A commemorative plaque cannot be installed without a DUI memorial marker.

2) The Department will periodically adjust the fees to reflect the current cost of installing and maintaining the signing with adjustments subject to rulemaking.

3) Once the fee is paid for a DUI memorial marker or a commemorative plaque and the marker or plaque is installed, the Department will maintain the marker or plaque for the entire 2-year period provided in Section 549.500(c)(3) without any additional cost to the qualified relative. (See Section 20(f) of the Act.)

4) **Subject to appropriation,** the Department will use the money in the Roadside Memorial Fund, as prescribed in Sections 27.5 and 27.6 of the Clerk of Courts Act [705 ILCS 105/27.5 and 27.6], Section 5-9-1.17 of the Unified Code of Corrections [730 ILCS 5/5-9-1.17] and in Section 20(f) of the Roadside Memorial Act [605 ILCS 125/20(f)], to pay the fees. When the fees are paid from the fund, no fees will be charged to the qualifying relative.

c) Placing and Maintaining Memorial Markers and Commemorative Plaques

1) The DUI memorial markers and commemorative plaques shall only be placed by the Department.

2) A DUI memorial marker and commemorative plaque shall be maintained for at least 2 years from the date the last person was memorialized on the plaque. (See Section 20(c) of the Act.)

3) The Department has the right to install a marker at a location other than the location of the crash or to relocate a marker due to restricted room,
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property owner complaints, interference with essential traffic control devices, safety concerns, or other restrictions. In such cases, the Department may select an alternate location. (See Section 20(d) of the Act.)

4) A DUI memorial marker and commemorative plaque may memorialize more than one victim who died as a result of the same crash. If one or more additional, unrelated DUI deaths subsequently occur in close proximity to an existing DUI memorial marker, the Department may use the same marker to memorialize the subsequent death or deaths by adding the names of the additional persons. (See Section 20(b) of the Act.)

5) The Department shall secure the consent of any municipality before placing a DUI memorial marker within the corporate limits of the municipality. (Section 20(e) of the Act.)

(Source: Amended at 34 Ill. Reg. ______, effective ____________)
1) **Heading of the Part:** Superfecta

2) **Code Citation:** 11 Ill. Adm. Code 311

3) **Section Number:** 311.40  
   **Adopted Action:** Amend

4) **Statutory Authority:** 230 ILCS 5/9(b)

5) **Effective Date of Rulemaking:** January 27, 2010

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this rulemaking contain incorporations by reference?** No

8) A copy of the adopted amendment, including any material incorporated by reference, is on file in the agency's central office and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register:** 33 Ill. Reg. 12646; September 18, 2009

10) **Has JCAR issued a Statement of Objection to this rulemaking?** No

11) **Differences between proposal and final version:** None

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the letter issued by JCAR?** No changes were made.

13) **Will this rulemaking replace any emergency rulemaking currently in effect?** No

14) **Are there any other proposed amendments pending on this Part?** No

15) **Summary and purpose of rulemaking:** This rulemaking amends the entry rule to prohibit superfecta wagering if there is an uncoupled entry after a betting interest is scratched late, reducing the field size from 7 betting interests to 6.

16) **Information and questions regarding this adopted amendment shall be directed to:**

   Mickey Ezzo  
   Illinois Racing Board
ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENT

100 West Randolph, Suite 7-701
Chicago, Illinois 60601

312/814-5017

The full text of the Adopted Amendment begins on the next page:
NOTICE OF ADOPTED AMENDMENT

TITLE 11: ALCOHOL, HORSE RACING, AND LOTTERY
SUBTITLE B: HORSE RACING
CHAPTER I: ILLINOIS RACING BOARD
SUBCHAPTER a: GENERAL RULES

PART 311
SUPERFECTA

Section 311.40  Entries

a) Entries, either coupled or uncoupled, shall be allowed in a superfecta race under the following conditions:

1) one entry requires at least seven betting interests at the start of the race except, in the event of a scratch, superfecta wagering on a race in which six betting interests remain is permissible, provided there are no uncoupled entries except, in the event of a scratch, Section 311.35(a)
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2) two entries require at least eight betting interests at the start of the race.

3) more than two entries shall require approval from the Stewards.

b) For stakes races with a minimum purse of $20,000, entries, either coupled or uncoupled, shall be allowed and there shall be no restrictions on minimum betting interests.

c) For stakes races with a minimum purse of $100,000, common owner entries, either coupled or uncoupled, shall be allowed and there shall be no restrictions on minimum betting interests.

d) This Section shall not apply to races that are permitted for simulcasting under Section 26(g) of the Act [230 ILCS 5/26(g)] or for uncoupled entries permitted in 11 Ill. Adm. Code 1413.114(c) when there are thoroughbred stakes races with purses of $250,000 or more.

(Source: Amended at 34 Ill. Reg. 2320, effective January 27, 2010)
ILLINOIS REGISTER

ILLINOIS RACING BOARD

NOTICE OF ADOPTED AMENDMENTS

1) **Heading of the Part:** Racing Rules

2) **Code Citation:** 11 Ill. Adm. Code 1318

3) **Section Numbers:**

   - 1318.90  Amend
   - 1318.100 Repeal
   - 1318.190 Amend

4) **Statutory Authority:** 230 ILCS 5/9(b)

5) **Effective Date of Rulemaking:** January 27, 2010

6) **Does this rulemaking contain an automatic repeal date?** No

7) **Does this rulemaking contain incorporations by reference?** No

8) A copy of the adopted amendments, including any material incorporated by reference, is on file in the agency’s central office and is available for public inspection.

9) **Notice of Proposal Published in Illinois Register:** 33 Ill. Reg. 6040; April 24, 2009 and 33 Ill. Reg. 12657; September 18, 2009.

10) **Has JCAR issued a Statement of Objection to this rulemaking?** No

11) **Differences between proposal and final version:** In Section 1318.90(d)(2), whipping violations after the fourth offense will be referred to the Racing Board.

12) **Have all the changes agreed upon by the agency and JCAR been made as indicated in the letter issued by JCAR?** Two separately proposed rulemakings were combined into this one adopted rulemaking. (See #9 above.)

13) **Will these amendments replace any emergency amendments currently in effect?** No

14) **Are there any other proposed amendments pending in this Part?** No

15) **Summary and purpose of rulemaking:** This rulemaking, in Section 1318.90, replaces the generic language with more specific language pertaining to the use of the standardbred whip. Most racing jurisdictions have, or are in the process of adopting, whipping reform
rules and penalties. Section 1318.190 prohibits harness drivers from using the open stretch to block or impede horses without advancing on a leading horse.

16) Information and questions regarding these adopted amendments shall be directed to:

Mickey Ezzo
Illinois Racing Board
100 West Randolph, Suite 7-701
Chicago, Illinois 60601

312/814-5017

The full text of the Adopted Amendments begins on the next page:
**NOTICE OF ADOPTED AMENDMENTS**

**TITLE 11: ALCOHOL, HORSE RACING, AND LOTTERY**  
**SUBTITLE B: HORSE RACING**  
**CHAPTER I: ILLINOIS RACING BOARD**  
**SUBCHAPTER f: RULES AND REGULATIONS OF HARNESS RACING**

**PART 1318**  
**RACING RULES**

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**AUTHORITY:** Implementing and authorized by Section 9(b) of the Illinois Horse Racing Act of 1975 [230 ILCS 5/9(b)].

Section 1318.90 Use of the Whip—Whips and Snappers

a) Drivers will be allowed whips not to exceed 4 feet in total length plus a snapper not longer than 6 inches. All whips are subject to inspection and measurement by the Board. Alteration of whips, in any manner, shall be considered a violation of this Section.

b) Whipping below the shafts, including but not limited to the stifle area, is prohibited.

c) The following actions shall include, but not limited to, excessive and/or abusive:

1) Whipping a horse during a post parade, scoring down, or after the finish of a race, except when necessary to control the horse;

2) Use of the butt end of the whip;

3) Striking any part of the horse under the tail and/or between the legs;

4) Whipping a horse that is no longer in contention and showing no response to the whip;

5) Causing visible injury; and

6) Use of any object or stimulating device and/or application.

d) Penalties

1) Penalties for violation of any of the provisions of this Section are as follows:

   A) 1st offense – $100 fine;

   B) 2nd offense within a 365 day period after the 1st offense – $300 fine;
Drivers will be allowed whips not to exceed three feet, 9 inches, plus a snapper not longer than six inches. At the discretion of the stewards, brutal, excessive or indiscriminate use of the whip, including but not limited to causing visible injury, whipping under the arch of shafts of the sulky or whipping after the race, is a violation punishable by a fine of not more than $200 and/or a three-day suspension. The stewards, in their discretion, may assess larger fines and/or longer suspensions for subsequent offenses. Use of the whip shall be confined to an area above and between the sulky shafts, including the sulky shaft. Use of the butt end of the whip is prohibited.

(Source: Amended at 34 Ill. Reg. 2324, effective January 27, 2010)

Section 1318.100 Goading Devices (Repealed)

The use of any goading device, chain, whip spur, whip spike or nail, headpole burr, line burr, any metal part of a whip or any chemical, mechanical device or appliance, other than the ordinary whip upon any horse shall constitute a violation of this rule, except that headpole burrs that have been approved by the Board may be used with the permission of the state steward.

(Source: Repealed at 34 Ill. Reg. 2324, effective January 27, 2010)

Section 1318.190 Open Stretch Racing

a) With approval of the Board, a track may extend the width of its homestretch up to 10 feet inward in relation to the width of the rest of the racetrack. The criteria for Board approval shall include, but not be limited to, the size of the race track, the length of the homestretch, the necessity for conversion from harness to thoroughbred racing surfaces and rails, and the type of existing rail.

b) In the event the home stretch is expanded pursuant to subsection (a), the following shall apply:
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1) No horse shall pass on the extended inside lane entering the stretch the first time on a ½ mile track.

2) The lead horse in the homestretch shall maintain as straight a course as possible while allowing trailing horses full access to the extended inside lane.

3) Horses using the open stretch must first have complete clearance of the pylons. Any horse or sulky running over the pylons and/or going to the inside of the pylons to clear shall be disqualified.

4) No horse may be driven into the open stretch for the purpose of blocking or impeding a trailing horse. It shall be presumed that a horse that blocks or impedes a trailing horse in the open stretch without advancing on a leading horse is being driven for the purpose of blocking or impeding a trailing horse. Violation of this provision may result in a disqualification, and the driver may be fined.

(Source: Amended at 34 Ill. Reg. 2324, effective January 27, 2010)
DEPARTMENT OF EMPLOYMENT SECURITY

NOTICE OF EMERGENCY AMENDMENT

1) Heading of the Part: Recovery Of Benefits

2) Code Citation: 56 Ill. Adm. Code 2835

3) Section Number: Emergency Action:
   2835.100 New

4) Statutory Authority: 820 ILCS 405/601, 900, 901, 1700, 1701 and 1706

5) Effective Date of Amendment: January 19, 2010

6) If this emergency amendment is to expire before the end of the 150-day period, please specify the date on which they are to expire: The Department has not specified an early expiration date.

7) Date Filed with the Index Department: January 19, 2010

8) A copy of the emergency amendment, including any material incorporated by reference, is on file in the Department’s principal office in Chicago and is available for public inspection.


10) A Complete Description of the Subjects and Issues Involved: This rulemaking explains one of the techniques used by the Department for detecting benefit fraud and the ramifications of such fraud.

11) Are there any proposed rulemakings pending on this Part? No

12) Statement of Statewide Policy Objectives: This emergency rulemaking does not create or expand a State mandate.

13) Information and questions regarding this emergency amendment shall be directed to:

   Gregory J. Ramel, Deputy Legal Counsel
   Illinois Department of Employment Security
   33 South State Street – Room 937
   Chicago, IL 60603
DEPARTMENT OF EMPLOYMENT SECURITY

NOTICE OF EMERGENCY AMENDMENT

Phone: 312/793-4240
Fax: 312/793-5645
e-mail: gregory.ramel@illinois.gov

The full text of the Emergency Amendment begins on the next page:
DEPARTMENT OF EMPLOYMENT SECURITY

NOTICE OF EMERGENCY AMENDMENT

TITLE 56: LABOR AND EMPLOYMENT
CHAPTER IV: DEPARTMENT OF EMPLOYMENT SECURITY
SUBCHAPTER e: RIGHTS AND DUTIES OF EMPLOYEES

PART 2835
RECOVERY OF BENEFITS

SUBPART A: GENERAL PROVISIONS

Section
2835.1 Recovery of Benefits by Recoupment
2835.5 Amounts Recoverable by Recoupment
2835.10 Time Limits Within Which to Recoup Benefits
2835.15 Extent of Recoupment
2835.20 Notice of Recoupment Decision
2835.25 Reconsideration Or Appeal Of Recoupment Decision
2835.30 Waiver Of Recoupment
2835.33 Waiver of Recovery (TRA)
2835.35 Benefits Received With Fault
2835.40 Benefits Received Without Fault
2835.45 Recoupment Against Equity and Good Conscience
2835.50 Request For And Decision Regarding Waiver Of Recoupment
2835.55 Reconsideration Or Appeal Of Denial Of Request For Waiver
2835.60 Periods When Waiver Of Recoupment Allowed
2835.65 Waiver Certifications By Mail

SUBPART B: DETECTION OF OVERPAYMENTS

2835.100 Cross Matching

EMERGENCY

TABLE A  Recoupment Matrix

AUTHORITY: Implementing and authorized by Sections 601, 900, 901, 1700, 1701 and 1706 of the Unemployment Insurance Act [820 ILCS 405/601, 900, 901, 1700, 1701 and 1706].

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September 28, 1984, for a maximum of 150 days; amended at 9 Ill. Reg. 2493, effective
Reg. 12776, effective July 14, 1986; amended at 11 Ill. Reg. 7626, effective April 14, 1987;
emergency amendment at 12 Ill. Reg. 231, effective January 1, 1988, for a maximum of 150
days; emergency expired May 30, 1988; amended at 12 Ill. Reg. 11746, effective July 5, 1988;
amended at 32 Ill. Reg. 18978, effective December 1, 2008; emergency amendment at 34 Ill.
Reg. 2330, effective January 19, 2010, for a maximum of 150 days.

SUBPART B: DETECTION OF OVERPAYMENTS

Section 2835.100 Cross Matching

The Department regularly matches its benefit payments records against the Illinois Directory of
New Hires and the Department's own wage record system. Where the cross matches suggest the
possibility that a claimant has worked during the period for which he or she was claiming
benefits, the Department will investigate further.

Example: An individual receives regular State benefits for the week beginning January 18, 2009, continuing through April 18, 2009. In certifying to his continued eligibility for benefits for those weeks, the individual indicates he did not work during any of those weeks. A December 2009 cross match against the Department's wage records for the first quarter of 2009 indicates the individual worked and was paid wages during that quarter. The follow-up investigation results in a determination, dated December 14, 2009, that the individual fraudulently claimed benefits for the week beginning January 18, 2009 through April 18, 2009, a total of 13 weeks, and the determination becomes legally final. The individual files a new claim for benefits, effective January 24, 2010, without yet having repaid any of the benefits he fraudulently obtained. The individual will not receive any benefits until he repays the entire amount fraudulently received. After repaying the benefits, the individual will remain ineligible for benefits under Section 901 of the Act [820 ILCS 405/901] until he has served 26 "penalty weeks" or December 18, 2011, whichever occurs first. A penalty week is a week in which the claimant is otherwise eligible to receive benefits but precluded from doing so because of a fraud determination. Six penalty weeks are assessed for the first week for which a claimant fraudulently obtained benefits, and two penalty weeks are assessed for each week thereafter for which the claimant fraudulently obtained benefits, up to a maximum of 26 penalty weeks. There is no durational limit on an individual's liability to repay fraudulently obtained benefits. The individual is also subject to criminal prosecution under the State Benefits Fraud Act [720 ILCS 5/17-6] for the fraudulent receipt of...
benefits. A conviction for State benefits fraud can result in imprisonment for generally up to five years and a fine of generally up to $25,000. The individual is also subject to a civil lawsuit for recovery of the overpayments.

(Source: Added by emergency rulemaking at 34 Ill. Reg. 2330, effective January 19, 2010, for a maximum of 150 days)
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1) **Heading of the Part:** Claimant's Reason For Separation From Work

2) **Code Citation:** 56 Ill. Adm. Code 2840

3) **Section Number:** 2840.101

4) **Emergency Action:** New

5) **Statutory Authority:** 820 ILCS 405/601, 602, 1700 and 1701

6) **Effective Date of Amendment:** January 19, 2010

7) **If these emergency amendments are to expire before the end of the 150-day period, please specify the date on which they are to expire:** The Department has not specified an early expiration date.

8) **Date Filed with the Index Department:** January 19, 2010

9) **A copy of the emergency amendment, including any material incorporated by reference, is on file in the Department's principal office in Chicago and is available for public inspection.**

10) **Reason for Emergency:** Rulemaking is required by P.A. 96-30.

11) **A Complete Description of the Subjects and Issues Involved:** The proposed rulemaking explains the principles to be applied in interpreting the provisions of Section 601 of the Act involving voluntary leaving.

12) **Are there any other proposed rulemakings pending on this Part?** No

13) **Statement of Statewide Policy Objectives:** This emergency does not create or expand a State mandate.

14) **Information and questions regarding this emergency amendment shall be directed to:**

   Gregory J. Ramel, Deputy Legal Counsel
   Illinois Department of Employment Security
   33 South State Street – Room 937
   Chicago, IL 60603
DEPARTMENT OF EMPLOYMENT SECURITY

NOTICE OF EMERGENCY AMENDMENT

Phone: 312/793-4240
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The full text of the Emergency Amendment begins on the next page.
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NOTICE OF EMERGENCY AMENDMENT

TITLE 56: LABOR AND EMPLOYMENT
CHAPTER IV: DEPARTMENT OF EMPLOYMENT SECURITY
SUBCHAPTER F: ELIGIBILITY FOR BENEFITS

PART 2840
CLAIMANT'S REASON FOR SEPARATION FROM WORK

SUBPART A: MISCONDUCT

Section 2840.25  What Is Meant By "Harm"

SUBPART B: VOLUNTARY LEAVING

Section 2840.101  General Principles for Interpreting Section 601 of the Act [820 ILCS 405/601]  
EMERGENCY
2840.125  Early Retirement Or Employment Buyout Packages

AUTHORITY: Implementing and authorized by Sections 601, 602, 1700 and 1701 of the Unemployment Insurance Act [820 ILCS 405/601, 602, 1700 and 1701].


SUBPART B: VOLUNTARY LEAVING

Section 2840.101  General Principles for Interpreting Section 601 of the Act [820 ILCS 405/601]  
EMERGENCY

a)  For an individual's separation from work to be a voluntary leaving, the individual must have the option to remain employed by the employing unit. The separation is a discharge if the individual does not have the option to remain employed by the employing unit. Notwithstanding any other provision to the contrary, where obtaining or maintaining a "tool of the trade" necessary to perform a job, including but not limited to an occupational or other license required by federal or State law, is within an individual's control, a work
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separation that results from the individual’s failure to obtain or maintain the tool of the trade is a voluntary leaving. An individual who is allowed to resign in lieu of discharge is considered as having been discharged.

1) Example: The individual is told that he will be discharged because of his poor attendance. However, in order to avoid having a discharge on his record, he is allowed to submit a resignation. This separation is not a voluntary leaving because the individual does not have the option to remain employed.

2) Example: The employing unit tells the individual that his position on the second shift has been eliminated. However, a position is available to the claimant on the first shift. The individual leaves rather than accept the first shift. This is a voluntary leaving.

3) Example: The individual informs the employing unit that he was involved in an automobile accident and will be unable to work until released by his doctor. The employing unit advises the individual that it cannot offer him a leave of absence and cannot keep his job open. This is a discharge because the employing unit has not given the individual the option of remaining employed.

4) Example: On Day 1, upon returning home from work, an individual is advised by her babysitter that, effective immediately, the sitter can no longer watch the individual’s two pre-school children. Before work on Day 2, the individual telephones her employer to advise him of the situation and says she may need a few days to find a new sitter. The employer indicates that she must come to work that day or he will consider her as having resigned. On Day 3, she telephones the employer to advise that she has some leads for a new sitter, but will need a few more days. She is advised the employer has accepted her resignation. The individual was discharged. Having been presented with the choice between keeping her job and ensuring her two pre-school children were properly attended, the individual did not have the option to remain employed by the employer.

5) Example: Upon returning home from work, an individual is advised by her babysitter that, effective immediately, the sitter can no longer watch the individual’s two pre-school children. Before work the
next day, the individual telephones her employer to advise him of the situation. The employer acknowledges the importance of finding a sitter with whom the individual is comfortable, indicates the company will work around her absence while she looks for a sitter and instructs her to telephone him at the end of two weeks if she still has not found a sitter. Without contacting the employer in the interim, she reports to work at the employer's premises one month later. She is advised that the employer assumed she was no longer interested in the job and hired a replacement, and there is no work available to her. The individual left work voluntarily. She had the option to remain in contact with her employer and thereby preserve the possibility of returning to work but did not avail herself of that option.

6) Example: An individual's job requires that he maintain a valid driver's license. After learning that the individual's driver's license has been suspended because of traffic violations, the employing unit instructs the individual that it no longer needs his services. The separation is considered a voluntary leave. The individual failed to maintain a tool of his trade, in this case, a valid driver's license.

7) Example: An individual is hired with the understanding that he must pass a State mandated licensing test within one year of his date of hire. The individual takes all of the training courses available to prepare for the test but still fails it on three occasions. The individual is told that his services are no longer needed as a result of his failure to obtain the required license by the one-year deadline. The resulting separation is not a voluntary leaving because the individual made a reasonable and substantial effort to obtain the required license. Obtaining the license was not within his control, and he did not have the option to remain employed by the employing unit.

8) Example: Pursuant to the terms of the collective bargaining agreement governing labor-management relations at the individual's workplace, the payment of union dues was a condition of employment. The individual refused to pay the dues, although she was financially able to do so. After the individual ignored warnings from the employer that she needed to pay the dues, the employer indicated that it was no longer able to employ her. The separation was a voluntary leave. The individual
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had the option of remaining employed by paying the dues, which she had the means to do, but failed to avail herself of that option.

9) Example: Rumors of a shutdown circulate within a plant, although the employer has not given any indication that it intends to close the plant or lay off any employees. After hearing the rumors, a worker at the plant quits to begin looking for work elsewhere, indicating he is not going to wait around to find out what happens at the plant. The separation was a voluntary leave, since the worker had the option of remaining at the plant.

10) Example: An individual becomes temporarily bed ridden after contracting the flu on a Sunday. When he telephones the employer the following day (Monday) to indicate that he is unable to go to work, the employer indicates that if he is not at work by the next day (Tuesday), he will be considered as having resigned. The individual is unable to return to work on Tuesday. When he calls the employer on Tuesday to indicate he is still unable to go to work, the employer indicates that he has accepted the individual's resignation. The individual was discharged. He did not have the option of remaining employed by the employer.

b) An individual has good cause for leaving work when there is a real and substantial reason that would compel a reasonable person who was genuinely desirous of remaining employed to leave work and the individual has made a reasonable effort to resolve the cause of his or her leaving, where such effort is possible.

1) Example: When hired, the individual commuted 5 miles each way to work. The employing unit then relocated its plant to a town over 150 miles from the individual's residence, causing a substantial increase in the individual's commuting costs and commuting time. As a result, the individual leaves his job. The individual had good cause for leaving work.

2) Example: An individual retires at the same time a coworker retires, because he believes work would not be as enjoyable without the coworker. The individual does not have good cause for leaving the job.

3) Example: An individual's paychecks are repeatedly returned due to insufficient funds, despite the individual's numerous complaints to the employer. Upon having yet another paycheck returned due to insufficient
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funds, the individual resigns. The individual has good cause for leaving the job.

4) Example: When hired, the individual was able to walk to work from his home in 15 minutes. Thereafter, the employing unit relocates to a distance approximately 5 miles from the individual's home, requiring the individual to use public transportation. The commute on public transportation is approximately 45 minutes each way. The individual quits his job because of the increase in commuting time. The individual does not have good cause for quitting.

c) To be attributable to an individual's employing unit, his or her reason for leaving work must be within the control of the employing unit. Situations in which the reason for leaving is attributable to the employer include but are not limited to situations in which the employing unit has implemented a substantial change in the conditions of employment.

1) Example: The individual relocates to a town over 150 miles from the job site. Because the commute would take more than 2 hours each way, the individual resigns. The individual's reason for leaving is not attributable to the employing unit because the employing unit had no control over where the individual chose to reside.

2) Example: When hired, the individual commuted 5 miles each way to work. The employing unit then relocated its plant to a town over 150 miles from the individual's residence, causing a substantial increase in the individual's commuting costs and commuting time. As a result, the individual leaves his job. The reason for his leaving is attributable to the employing unit since the employing unit changed the conditions of employment by moving its plant to a location substantially farther from the individual's residence.

3) Example: An individual concludes she is not living up to her full potential in her present job and quits to return to school. The employer has made no changes in the terms or conditions of her employment and has not given the individual any reason to suspect any such changes are forthcoming. The individual's reason for leaving is not attributable to the employing unit.
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4) Example: An individual quits his job to work for a different employer. The employing unit that the individual leaves has made no changes in the terms or conditions of his employment and has not given the individual any reason to suspect any such changes are forthcoming. The individual's reason for leaving is not attributable to the employing unit.

5) Example: The employer announces that, as a result of a loss of a major client, hourly wages will be reduced from $15 to $10, whereupon an employee quits. The employee's reason for leaving is attributable to the employer, since the reduction is a substantial change in working conditions. The employee will still have to demonstrate that there was good cause for leaving.

6) Example: An individual quits work because her supervisor is demeaning and abusive to her, but she has not complained to higher management about the supervisor even though the employer has a policy encouraging employees to report abusive supervisors, and higher management is not otherwise aware of the supervisor's conduct. The individual's leaving was not attributable to her employer. Since higher management was not aware of the supervisor's conduct, the reason for the individual's leaving was not within the employer's control.

7) Example: An individual assigned to clean an area in the facility where he works objects to the odor of the cleaning fluid the employer provides and requests the employer to switch to a fluid the individual considers preferable. The employer denies the request, stating that there is no indication the fluid it uses is unsafe, and no one else has objected to the odor. The individual quits because the request is denied. The type of cleaning fluid used is within the employer's control, so the reason for quitting is attributable to the employer. However, to avoid disqualification, the individual will have to demonstrate he had good cause for quitting.

d) Subsection B of Section 601 [820 ILCS 405/601B] lists situations in which an individual will not be disqualified from receiving unemployment benefits even though he or she has left work voluntarily for a reason which is not necessarily attributable to his or her employer:
1) Example: The individual is employed as a full time bank teller. His wife develops a serious medical condition that requires constant supervision. A friend can watch the claimant's wife each morning. The individual asks if he can work mornings only so that he can be home to watch his wife during the afternoon. The employer indicates that it is unable to switch the individual to part time hours. If the claimant leaves work to care for his wife, he is not subject to disqualification because his case falls within the exception provided at Section 601B(1) of the Act [820 ILCS 405/601B(1)].

2) Example: The individual works the third shift. The individual's spouse becomes ill and needs 24-hour assistance. The individual is able to obtain county services to care for the spouse during the day, but the only option for nighttime care is prohibitively expensive. The employer indicates that it is unable to move the individual to the first shift. If the individual leaves work to care for his wife, he is not subject to disqualification because his case falls within the exception set forth in Section 601B(1) of the Act [820 ILCS 405/601B(1)].

3) Example: The individual is a skilled metalworker. He quits his job to start his own metal working business. For a few weeks, the business is quite successful, and he earns over his weekly benefit amount in each of at least two weeks. However, after a while, business falls off substantially. He files a claim for unemployment insurance benefits. He is not subject to disqualification because his case falls within the exception provided at Section 601B(2) of the Act [820 ILCS 405/601B(2)].

4) Example: An individual complains to her supervisor about persistent sexual advances by a co-worker. The supervisor takes no further action believing the individual can take care of herself. The advances continue causing the individual to quit her job. The individual is not subject to disqualification because her case will fall within the exception at Section 601B(4) of the Act [820 ILCS 405/601B(4)] since the employer knew of the harassment and failed to take any action.

5) Example: An individual's ex-boyfriend periodically waits outside her job site and threatens her when she arrives and leaves work. Fearing for her safety, she stops coming to work, informing the employing unit of her reason for leaving and providing the Agency with a copy of a letter
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signed by the individual's social worker, indicating the individual is receiving domestic violence services. Her case falls within Section 601B(6) of the Act [820 ILCS 405/601B(6)].

6) Example: An individual who works nights lives with her 17-year-old daughter. Her daughter's ex-boyfriend has been harassing the daughter, repeatedly following the daughter in public and making threatening telephone calls to the daughter at her home at night. Fearing for the daughter's safety, the individual quits her job to be home at night with the daughter. She informs the employer of her reason for quitting and provides the Agency with a copy of the police report regarding the threatening calls. Her case falls within Section 601B(6) of the Act [820 ILCS 405/601B(6)].

7) Example: An individual's ex-boyfriend periodically waits outside her job site and threatens her when she arrives and leaves work. Fearing for her safety, she stops coming to work. She informs the employer of her reason for leaving but fails to provide the Agency with any of the evidence enumerated in Section 601B(6) of the Act [820 ILCS 405/601B(6)] as acceptable proof of domestic violence. Her case will not fall within Section 601B(6).

8) Example: An individual lives and works in Chicago with his wife. The wife accepts a new job in Los Angeles, CA, and the individual and his wife both agree they will move to Los Angeles together. The individual leaves his job when it is time to move to Los Angeles. The individual is not disqualified for leaving the job. It would be impractical for him to commute from Los Angeles to his job in Chicago, and his case, therefore, falls within Section 601B(7) of the Act.

9) Example: An individual's drive to work from Lincoln to Bloomington took about 45 minutes. The individual moved to Decatur when his spouse was transferred to that city. The individual quits his job to look for work in Decatur, although there is no reason that he could not have continued driving to work in Bloomington as the drive to Bloomington would only have been 15 minutes longer from Decatur. The individual's case does not fall within Section 601B(7) of the Act [820 ILCS 405/601B(7)] because commuting from Decatur to Bloomington would not be impractical.
Example: An individual's commute to work within the City of Chicago by bicycle took about 45 minutes. The individual and his wife move to Skokie, a Chicago suburb, when his spouse is transferred to Buffalo Grove, another Chicago suburb. While the individual's commute time by automobile would still be about 45 minutes, the individual refuses to use an automobile even though one is available to him. Leaving under these circumstances would not fall within the exception in Section 601B(7) of the Act [820 ILCS 405/601B(7)] because commuting would not be impractical. Bicycling is the individual's personal preference.

(Source: Added by emergency rulemaking at 34 Ill. Reg. 2335, effective January 19, 2010, for a maximum of 150 days)
JOINT COMMITTEE ON ADMINISTRATIVE RULES
FEBRUARY AGENDA

SCHEDULED MEETING:

STRATTON OFFICE BUILDING
ROOM C-1
SPRINGFIELD, ILLINOIS
9:00 A.M.
FEBRUARY 9, 2010

NOTICES: The scheduled date and time for the JCAR meeting are subject to change. Due to Register submittal deadlines, the Agenda below may be incomplete. Other items not contained in this published Agenda are likely to be considered by the Committee at the meeting and items from the list can be postponed to future meetings.

If members of the public wish to express their views with respect to a rulemaking, they should submit written comments to the Office of the Joint Committee on Administrative Rules at the following address:

Joint Committee on Administrative Rules
700 Stratton Office Building
Springfield, Illinois 62706
Email: jcar@ilga.gov
Phone: 217/785-2254

RULEMAKINGS CURRENTLY BEFORE JCAR

PROPOSED RULEMAKINGS

Children and Family Services

1. Placement and Visitation Services (89 Ill. Adm. Code 301)
   -First Notice Published: 33 Ill. Reg. 9548 – 7/10/09
   -Expiration of Second Notice: 2/10/10

2. Services Delivered by the Department of Children and Family Services (89 Ill. Adm. Code 302)
   -First Notice Published: 33 Ill. Reg. 14227 – 10/16/09
   -Expiration of Second Notice: 2/24/10

Civil Service System
3. Civil Service System (80 Ill. Adm. Code 1)
   -First Notice Published: 33 Ill. Reg. 5051 – 4/10/09
   -Expiration of Second Notice: 3/7/10

   Education

4. Public Schools Evaluation, Recognition and Supervision (23 Ill. Adm. Code 1)
   -First Notice Published: 33 Ill. Reg. 15931 – 11/20/09
   -Expiration of Second Notice: 2/27/10

5. School Construction Program (23 Ill. Adm. Code 151)
   -First Notice Published: 33 Ill. Reg. 15387 – 11/13/09
   -Expiration of Second Notice: 2/27/10

6. Driver Education (23 Ill. Adm. Code 252)
   -First Notice Published: 33 Ill. Reg. 15972 – 11/20/09
   -Expiration of Second Notice: 2/27/10

Finance Authority

7. Illinois Finance Authority (74 Ill. Adm. Code 1100)
   -First Notice Published: 33 Ill. Reg. 10187 – 7/17/09
   -Expiration of Second Notice: 2/26/10

Financial and Professional Regulation

   -First Notice Published: 33 Ill. Reg. 13966 – 10/9/09
   -Expiration of Second Notice: 2/10/10

Gaming Board

   -First Notice Published: 33 Ill. Reg. 14667 – 10/30/09
   -Expiration of Second Notice: 3/5/10

Human Rights Commission

JOINT COMMITTEE ON ADMINISTRATIVE RULES
FEBRUARY AGENDA

-First Notice Published: 33 Ill. Reg. 15300 – 11/13/09
-Expiration of Second Notice: 2/12/10

Human Services

   -First Notice Published: 33 Ill. Reg. 13244 – 10/16/09
   -Expiration of Second Notice: 2/17/10

12. Aid to the Aged, Blind or Disabled (89 Ill. Adm. Code 113)
   -First Notice Published: 33 Ill. Reg. 12644 – 9/18/09
   -Expiration of Second Notice: 2/25/10

13. Supplemental Nutrition Assistance Program (89 Ill. Adm. Code 121)
   -First Notice Published: 33 Ill. Reg. 11772 – 8/14/09
   -Expiration of Second Notice: 2/25/10

   -First Notice Published: 33 Ill. Reg. 14463 – 10/23/09
   -Expiration of Second Notice: 2/25/10

Insurance

   -First Notice Published: 33 Ill. Reg. 14927 – 11/6/09
   -Expiration of Second Notice: 2/27/10

Natural Resources

   -First Notice Published: 33 Ill. Reg. 15990 – 11/20/09
   -Expiration of Second Notice: 3/7/10

17. Incidental Taking of Endangered or Threatened Species (17 Ill. Adm. Code 1080)
   -First Notice Published: 33 Ill. Reg. 15344 – 11/13/09
   -Expiration of Second Notice: 2/25/10

Pollution Control Board
   -First Notice Published: 33 Ill. Reg. 12439 – 9/11/09
   -Expiration of Second Notice: 2/10/10

   -First Notice Published: 33 Ill. Reg. 12446 – 9/11/09
   -Expiration of Second Notice: 2/10/09

   -First Notice Published: 33 Ill. Reg. 12426 – 9/11/09
   -Expiration of Second Notice: 2/10/10

Public Health

   -First Notice Published: 33 Ill. Reg. 12347 – 9/4/09
   -Expiration of Second Notice: 2/18/10

   -First Notice Published: 33 Ill. Reg. 15355 – 11/13/09
   -Expiration of Second Notice: 2/28/10

Racing Board

23. Racetrack Improvements (11 Ill. Adm. Code 452)
   -First Notice Published: 33 Ill. Reg. 12653 – 9/18/09
   -Expiration of Second Notice: 2/16/10

Secretary of State

24. Departmental Duties (2 Ill. Adm. Code 552)
   -First Notice Published: 33 Ill. Reg. 12515 – 9/11/09
   -Expiration of Second Notice: 2/20/10

   -First Notice Published: 33 Ill. Reg. 12520 – 9/11/09
   -Expiration of Second Notice: 2/24/10

26. Certificates of Title, Registration of Vehicles (92 Ill. Adm. Code 1010)
JOINT COMMITTEE ON ADMINISTRATIVE RULES
FEBRUARY AGENDA

-First Notice Published: 33 Ill. Reg. 12527 – 9/11/09
-Expiration of Second Notice: 2/24/10

State Universities Civil Service System

27. State Universities Civil Service System (80 Ill. Adm. Code 250)
   -First Notice Published: 33 Ill. Reg. 16669 – 12/4/09
   -Expiration of Second Notice: 3/7/10

Transportation

28. Tourist Oriented Directional Signing Program (92 Ill. Adm. Code 541)
   -First Notice Published: 33 Ill. Reg. 16540 – 11/30/09
   -Expiration of Second Notice: 2/28/10

29. Engine Braking Signs (92 Ill. Adm. Code 547)
   -First Notice Published: 33 Ill. Reg. 16552 – 11/30/09
   -Expiration of Second Notice: 2/28/10

Veterans’ Affairs

30. Veterans’ Scratch-Off Lottery Program (95 Ill. Adm. Code 125)
   -First Notice Published: 33 Ill. Reg. 14933 – 11/6/09
   -Expiration of Second Notice: 2/10/10

EMERGENCY RULEMAKINGS

Agriculture

   -Notice Published: 34 Ill. Reg. 301 – 1/4/10

Central Management Services

32. Pay Plan (80 Ill. Adm. Code 310)
   -Notice Published: 34 Ill. Reg. 957 – 1/15/10

Public Health

Racing Board

34. Advance Deposit Wagering (ADW) (11 Ill. Adm. Code 325)
   - Notice Published: 34 Ill. Reg. 996 – 1/15/10

PEREMPTORY RULEMAKINGS

Central Management Services

35. Pay Plan (80 Ill. Adm. Code 310)
   - Notice Published: 34 Ill. Reg. 305 – 1/4/10

36. Pay Plan (80 Ill. Adm. Code 310)
   - Notice Published: 34 Ill. Reg. 1425 – 1/22/10

EXEMPT RULEMAKING

Pollution Control Board

   - Proposed Date: 10/16/09
   - Adopted Date: 1/22/10
The following second notices were received by the Joint Committee on Administrative Rules during the period of January 19, 2010 through January 25, 2010 and have been scheduled for review by the Committee at its February 9, 2010 meeting. Other items not contained in this published list may also be considered. Members of the public wishing to express their views with respect to a rulemaking should submit written comments to the Committee at the following address: Joint Committee on Administrative Rules, 700 Stratton Bldg., Springfield IL 62706.

<table>
<thead>
<tr>
<th>Second Notice Expires</th>
<th>Agency and Rule</th>
<th>Start Of First Notice</th>
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<td></td>
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<td>3/7/10</td>
<td>Department of Natural Resources, Commercial Fishing and Musseling in Certain Waters of the State (17 Ill. Adm. Code 830)</td>
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<td>3/7/10</td>
<td>Civil Service Commission, Civil Service Commission (80 Ill. Adm. Code 1)</td>
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DEPARTMENT OF REVENUE

NOTICE OF PUBLIC INFORMATION

1. Statute requiring agency to publish information concerning Private Letter Rulings and General Information Letters in the Illinois Register:

   Name of Act: Illinois Department of Revenue Sunshine Act
   Citation: 20 ILCS 2515/1 et seq.

2. Summary of information:

   Index of Department of Revenue income tax Private Letter Rulings and General Information Letters issued for the Fourth Quarter of 2009. Private letter rulings are issued by the Department in response to specific taxpayer inquiries concerning the application of a tax statute or rule to a particular fact situation. Private letter rulings are binding on the Department only as to the taxpayer who is the subject of the request for ruling. (See 2 Ill. Adm. Code 1200.110) General information letters are issued by the Department in response to written inquiries from taxpayers, taxpayer representatives, business, trade, industrial associations or similar groups. General information letters contain general discussions of tax principles or applications. General information letters are designed to provide general background information on topics of interest to taxpayers. General information letters do not constitute statements of agency policy that apply, interpret, or prescribe tax laws administered by the Department. General information letters may not be relied upon by taxpayers in taking positions with reference to tax issues and create no rights for taxpayers under the Taxpayers’ Bill of Rights Act. (See 2 Ill. Adm. Code 1200.120)

   The letters are listed numerically, are identified as either a General Information Letter or a Private Letter Ruling and are summarized with a brief synopsis under the following subjects:

   Addition Modifications – Other Rulings
   Apportionment – Sales Factor
   Apportionment – Other Rulings
   Base Income
   Credits – Foreign Tax
   Exemptions
   Net Income (Loss) And Net Loss Deduction
   Public Law 86-272/Nexus
   Residency/Nonresidency
NOTICE OF PUBLIC INFORMATION

Copies of the ruling letters themselves are available for inspection and may be purchased for a minimum of $1.00 per opinion plus 50 cents per page for each page over one. Copies of the ruling letters may be downloaded free of charge from the Department's World Wide Web site at www.tax.illinois.gov.


3. Name and address of person to contact concerning this information:

   Linda Settle
   Illinois Department of Revenue
   Legal Services Office
   101 West Jefferson Street
   Springfield, Illinois  62794

   Telephone: 217/782-7055
DEPARTMENT OF REVENUE
NOTICE OF PUBLIC INFORMATION

2009 FOURTH QUARTER INCOME TAX SUNSHINE INDEX

ADDITION MODIFICATIONS – OTHER RULINGS

IT 09-0043-GIL 10/28/2009 Amount of addition modification related to new credit for employer contributions to IRC Section 529 plans is equal to the amount of the credit allowable, without reduction for carryovers to other years.

APPORTIONMENT – SALES FACTOR

IT 09-0044-GIL 12/11/2009 Request for guidance on sales factor computation contained insufficient information to support any conclusion.

APPORTIONMENT – OTHER RULINGS

IT 09-0002-PLR 12/03/2009 Petition granted for taxpayer to apply amendment to regulation Section 100.3380 retroactively.

BASE INCOME

IT 09-0036-GIL 10/13/2009 Capital loss carrybacks properly allowed in the computation of federal taxable income are allowed in computing base income.

IT 09-0037-GIL 10/15/2009 No adjustments to federal passive loss limitations or carryovers are allowed in computing base income.

IT 09-0041-GIL 10/22/2009 No adjustments to at-risk loss limitations or carryovers are allowed in computing base income.

CREDITS – FOREIGN TAX

IT 09-0035-GIL 10/05/2009 Computation of Iowa double-taxed income explained.
DEPARTMENT OF REVENUE

NOTICE OF PUBLIC INFORMATION

EXEMPTIONS

IT 09-0040-GIL 10/20/2009  Taxpayer who is not required to obtain Social Security Number for dependent children in order to claim federal exemptions is allowed Illinois exemptions as well.

NET INCOME (LOSS) AND NET LOSS DEDUCTION

IT 09-0038-GIL 10/19/2009  A trust may not succeed to an Illinois net loss carryover of another trust.

PUBLIC LAW 86-272/NEXUS

IT 09-0039-GIL 10/19/2009  Sales made in Illinois by mobile sales unit are sufficient to provide nexus with the State.

IT 09-0045-GIL 12/10/2009  Installation of equipment sold to Illinois customers is not an activity protected by Public Law 86-272.

RESIDENCY/NONRESIDENCY

IT 09-0042-GIL 10/26/2009  Residency laws explained.
WHEREAS, the timing, spread and severity of influenza viruses is uncertain; and

WHEREAS, influenza vaccination is the most effective method for preventing influenza and influenza-related complications; and

WHEREAS, the State of Illinois has an obligation to protect the health and welfare of its citizens; and

WHEREAS, health officials have confirmed the 2009 H1N1 flu vaccination is now widely available and are urging people of all ages across the United States to get vaccinated as it becomes available in their communities; and

WHEREAS, flu vaccines not only protect the person vaccinated but can also prevent the spread of influenza to their close contacts:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim January 10-16, 2010 as NATIONAL INFLUENZA VACCINATION WEEK in Illinois, and urge all citizens to observe this week by getting the H1N1 flu vaccine and encouraging friends, fellow employees, and relatives to do the same.

Issued: January 10, 2010
Filed: January 22, 2010.

WHEREAS, since its initiation by Congress in 1994, the King Day of Service has created a nationwide effort to transform the federal holiday honoring Dr. Martin Luther King, Jr. into a day of community service, grounded in Dr. King's teachings, that helps solve social problems; and

WHEREAS, each year hundreds of thousands of volunteers in cities and towns across the nation participate in thousands of King Day service projects in all fifty states, the District of Columbia, Guam, and Puerto Rico. In 2009, more than one million Americans served in 13,000 projects nationwide; and

WHEREAS, the Corporation for National and Community Service, in collaboration with the Martin Luther King, Jr. Center for Nonviolent Social Change, honors Dr. King's vision in
recognizing the power of service to strengthen communities and achieve common goals every year on the third Monday in January; and

WHEREAS, in cooperation with President Obama's national call to service and the recent passage of the Edward M. Kennedy Serve America Act, the King Day of Service, which falls on January 18 this year, is an opportune time for the people of Illinois to recognize Dr. King's teachings on advancing equality and opportunity for all by contributing their own time and talents in a day of service; and

WHEREAS, on this day, the Serve Illinois Commission and the state's AmeriCorps programs and the LeaderCorps representatives have collaborated to organize statewide service day events in celebration of the King Day of Service:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim January 18, 2010 as MARTIN LUTHER KING, JR. DAY OF SERVICE in Illinois, and urge all citizens to honor the memory of Dr. King and put his teachings into action by finding ways to give back to their communities.

Issued: January 11, 2010
Filed: January 22, 2010

2010-6
Illinois Association of Agricultural Fairs Day

WHEREAS, agriculture is one of the State of Illinois' largest and most important economic activities; and

WHEREAS, the bounty of Illinois' agricultural producers is showcased in the myriad of county fairs held every year across the Land of Lincoln; and

WHEREAS, these many county fairs are united and represented by one organization – the Illinois Association of Agricultural Fairs; and

WHEREAS, the Illinois Association of Agricultural Fairs (IAAF) is an organization of the 104 Illinois County Fairs, the Illinois and DuQuoin State Fairs, and approximately 290 Associate Members; and

WHEREAS, the IAAF was founded in 1910 and selected Len Small, President of the Kankakee Interstate Fair, as the Association's first President. Len Small would go on to become the 26th Governor of the State of Illinois; and
WHEREAS, for 100 years the IAAF has served as an advocate for its members’ interests, facilitating the exchange of information and ideas related to county fairs through its newsletter and an annual convention; and

WHEREAS, it is a remarkable achievement for any Association, especially one spread as far as the IAAF across the length and breadth of Illinois, to prosper for 100 years; and

WHEREAS, the longevity of the IAAF is a tribute to the thousands of men and women who have served the Association and its member fairs over these many years; and

WHEREAS, the Association continues to gain momentum as the years roll along, taking on new challenges as they arise; and

WHEREAS, during the IAAF’s 2010 Annual Convention, which has been held in Springfield every year for more than 65 years, the Association will celebrate its 100th Anniversary:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim January 15, 2010 as ILLINOIS ASSOCIATION OF AGRICULTURAL FAIRS DAY in Illinois, in recognition of the IAAF’s 100th Anniversary.

Issued: January 12, 2010.
Filed: January 22, 2010

2010-7
Chicago Music Awards Day

WHEREAS, on Sunday, January 24, 2010, Martin's International Culture will present the 29th Annual Chicago Music Awards; and

WHEREAS, the Annual Chicago Music Awards has been the primary organization that honors Illinois entertainers in various music genres such as: Pop, Rock, Gospel, Soul/R&B, Blues, Jazz, Reggae, Country/Western, Latin, Opera, Dance Classical, Polka, Kids and other World Music; and

WHEREAS, the Music Awards was founded in 1981 by Ephraim M. Martin, a journalist, entrepreneur and television personality, to honor reggae and other world-beat music, arts and cultures, but has expanded so that all categories of music performed in Illinois can be better appreciated; and

WHEREAS, at the 29th Annual Chicago Music Awards, Lifetime Achievement Awards will be bestowed on several Illinois legends: Etta James (R&B/Soul), Calvin Martin Stallard
PROCLAMATIONS

(Country/Western), Bruce Korosa (Polka), Producer Henry Cardenas, and Radio host Lucky Cordell; and

WHEREAS, the 29th Annual Chicago Music Awards Ceremony is dedicated to Health Awareness, encourages high standards of performance, conduct and professionalism in the music industry, and exhibits the wealth of talent Illinois has to offer:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim January 24, 2010 as CHICAGO MUSIC AWARDS DAY in Illinois, in recognition of the Chicago Music Awards' and its honorees' contributions to music, art, and culture in the Land of Lincoln.

Filed: January 22, 2010

2010-8
Ryan and Jenny Dempster Family Foundation Day

WHEREAS, Ryan Dempster is a starting pitcher for the Chicago Cubs, two-time All Star, committed philanthropist, and dedicated father; and

WHEREAS, Ryan Dempster's charitable endeavors include assisting the Juvenile Diabetes Research Foundation and Garth Brooks' Teammates for Kids. In 2006, Ryan and his wife, Jenny, established 'Dempster's Dugout,' a charitable ticket program that benefits local social service agencies that assist low-income children. Through this program, Ryan and Jenny host more than 500 children a year at select Cubs games; and

WHEREAS, Ryan Dempster's philanthropy has earned him numerous awards and recognitions over the years, but his newest cause, The Ryan and Jenny Dempster Family Foundation, is particularly personal to the Dempster family; and

WHEREAS, on April 1, 2009, Riley Elizabeth Dempster, the youngest member of the Dempster Roster, was born to proud parents Jenny and Ryan. Riley was born with DiGeorge Syndrome, a rare congenital disorder whose symptoms vary greatly between individuals but can include heart defects and characteristic facial features; and

WHEREAS, The Ryan and Jenny Dempster Family Foundation is dedicated to raising awareness of DiGeorge Syndrome and reaching out to families of children with DiGeorge Syndrome to help them deal with difficult situations they face each day; and
PROCLAMATIONS

WHEREAS, The Ryan and Jenny Dempster Family Foundation strives to lend support to charities and organizations supporting children with DiGeorge Syndrome through monetary grants, programs and increased community awareness; and

WHEREAS, The Ryan and Jenny Dempster Family Foundation empowers organizations to help children with rare illnesses overcome difficult situations; and

WHEREAS, on January 17, 2010, The Ryan and Jenny Dempster Family Foundation will be officially launched at an event in Chicago:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim January 17, 2010 as RYAN AND JENNY DEMPSTER FAMILY FOUNDATION DAY in Illinois, to raise awareness of both DiGeorge Syndrome and the charities that exist to help children and families in need.

Issued: January 15, 2010
Filed: January 22, 2010

2010-9
Corporal Jamie R. Low

WHEREAS, on Monday, January 11, Marine Corporal Jamie R. Lowe of Johnsonville died at age 21 while supporting combat operations in Helmand province, Afghanistan, where Corporal Lowe was serving in support of Operation Enduring Freedom; and

WHEREAS, Corporal Lowe was assigned to the 3rd Reconnaissance Battalion, 3rd Marine Division, III Marine Expeditionary Force, based in Okinawa, Japan; and

WHEREAS, Corporal Lowe graduated from Cisne High School in 2007 where he was active in the Young Marines. He joined the Marine Corps right after graduation; and

WHEREAS, Corporal Lowe attended Orchardville Community Church and was remembered by friends and family as a hard-worker who had always wanted to be a Marine; and

WHEREAS, a funeral will be held on Wednesday, January 20 for Corporal Lowe, who is survived by his parents and two brothers:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby order all State facilities to fly their flags at half-staff immediately until sunset on January 20, 2010 in honor and remembrance of Corporal Lowe, whose selfless service and sacrifice is an inspiration.
2010-10
Ambuc Appreciation Month

WHEREAS, Ambucs is a national organization comprised of local civic clubs located throughout the United States dedicated to creating mobility and independence for people with disabilities, by performing community service, providing AmTryke therapeutic tricycles for children with disabilities, and providing scholarships for therapists; and

WHEREAS, there are twelve Ambucs Chapters located in the State of Illinois and devoted to the Mission of National Ambucs, namely: Cornbelt Bloomington Ambucs; Champaign-Urbana Ambucs; Danville Ambucs; Decatur Ambucs; Lincolnland Decatur Ambucs; Jacksonville Ambucs; Loves Park Ambucs; Pekin Ambucs; Rockford Ambucs; Springfield Ambucs; Sullivan Ambucs; Tuscola Ambucs; and Greater Champaign County Ambucs; and

WHEREAS, the number of Ambucs actively involved in their local and National Ambucs Chapters in the State of Illinois totals 570, with the largest Ambucs Chapter in the entire National Ambucs network being the Springfield Ambucs Chapter at 200 members and friends; and

WHEREAS, Ambucs Chapters and Ambuc individuals throughout the great State of Illinois annually and freely contribute thousands of hours of community service and hundreds of thousands of dollars of monetary gifts to providing Amtrykes to disabled children, endowing scholarships for therapy students, building ramps for disabled persons, and countless other deserving local and national projects:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim February 2010 as AMBUCS APPRECIATION MONTH in Illinois, in recognition of the fine accomplishments, unequaled charitable giving, and selfless contributions of the individual Ambucs and Ambuc Chapters throughout the Land of Lincoln.

Issued: January 21, 2010
Filed: January 22, 2010

2010-11
Campus Fire Safety Month

WHEREAS, college students living on their own for the first time are particularly susceptible to the danger posed by fires; and
WHEREAS, in recent years, student housing fires have occurred in Illinois in DeKalb and Edwardsville; and

WHEREAS, since January 2000, at least 135 people, including students, parents, and children have died in campus-related fires in the U.S.; and

WHEREAS, over 80 percent of those deaths occurred in off-campus occupancies where the majority of students live unsupervised; and

WHEREAS, fire education and prevention are vital to ensuring the safety of Illinoisans and Americans; and

WHEREAS, most fires can be avoided by practicing some simple commonsense behaviors and routines, such as: checking and turning off the oven and stove before going to sleep or leaving home, not overloading electrical circuits, safely stowing all dangerous and hazardous materials, keeping any electrical devices clear of water, checking and maintaining alarm and sprinkler systems, and noting the location of fire extinguishers to use in the event of an emergency; and

WHEREAS, education significantly helps minimize the risk of fire by raising awareness of those behaviors and routines, but many students do not receive effective fire safety education throughout their college career when they are generally most at risk:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim September 2010 as CAMPUS FIRE SAFETY MONTH in Illinois, to encourage educators to provide educational programs on the dangers and prevention of fire as students begin and return to college, and to urge local fire officials to work with college and university administrators to help raise awareness among students of the importance of fire safety in college life.

Issued: January 21, 2010
Filed: January 22, 2010

2010-12
Caribbean-American Heritage Month

WHEREAS, emigration from the Caribbean region to the American Colonies began as early as 1619 with the arrival of indentured workers in Jamestown, Virginia; and

WHEREAS, much like the United States, the countries of the Caribbean faced obstacles of slavery and colonialism and struggled for independence; and
WHEREAS, the independence movements in many countries in the Caribbean during the 1960's and the consequential establishment of independent democratic countries in Caribbean strengthened ties between the region and the United States; and

WHEREAS, Alexander Hamilton, a founding father of the United States and the first Secretary of the Treasury, was born in the Caribbean; as also were Jean Baptiste Point du Sable, the pioneer settler of Chicago, Shirley Chisholm, the first African-American Congresswoman and first African-American woman candidate for President, and Celia Cruz, the world renowned queen of salsa music; and

WHEREAS, the many other influential Caribbean-Americans in the history of the United States also include Eric Holder, United States Attorney General, Sonia Sotomayor, Supreme Court Justice, Maria Kong, the second female President of the National Association of Real Estate Brokers, and fashion icon Oscar de La Renta; and

WHEREAS, Caribbean-Americans have contributed greatly to education, fine arts, business, literature, journalism, sports, fashion, politics, government, the military, music, science, technology, and other areas in the United States; and

WHEREAS, Caribbean-Americans share their culture through carnivals, festivals, music, dance, film, and literature that enrich the cultural landscape of the United States; and

WHEREAS, the people of the Caribbean region share the hopes and aspirations of the people of the State of Illinois, and the United States, for peace and prosperity:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim June 2010 as CARIBBEAN-AMERICAN HERITAGE MONTH in Illinois, and encourage all citizens to learn about the wonderful contributions that Caribbean-Americans have made to our state, and to the nation as a whole.

Issued: January 21, 2010
Filed: January 22, 2010

2010-13
Congenital Heart Defect Awareness Week

WHEREAS, congenital heart defects, the most common type of major birth defect and the leading cause of birth defect related deaths, develop during pregnancy when a baby's heart fails to form properly, resulting in structural abnormalities; and
WHEREAS, every year, approximately 40,000 babies in the United States, including about 2,000 in Illinois, are born with congenital heart defects, resulting in thousands of families across America facing the challenge and hardship of raising children with this birth defect; and

WHEREAS, congenital heart defects are still a little known problem and, as a result, congenital heart defects may not be diagnosed until months or years after birth; and

WHEREAS, those born with congenital heart defects are usually not diagnosed and treated until later, which creates complications and concerns; and

WHEREAS, many deaths of young athletes due to cardiac arrest are attributed to treatable congenital heart defects that go undiagnosed; and

WHEREAS, the proper treatment for those with a congenital heart defect can mean living a healthy life well into adulthood; and

WHEREAS, by raising awareness about congenital heart defects and the importance of early detection and treatment, we can save countless lives:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim February 7-14, 2010 as CONGENITAL HEART DEFECT AWARENESS WEEK in Illinois, to promote early detection and treatment of the problem.

Issued: January 21, 2010
Filed: January 22, 2010
PROCLAMATIONS

WHEREAS, young people can choose better relationships when they understand that healthy relationships are based on respect; and

WHEREAS, young people can better protect themselves when they learn to identify the early warning signs of an abusive relationship; and

WHEREAS, unfortunately, 81 percent of parents either believe teen dating violence is not an issue or admit they do not know if it is an issue; and

WHEREAS, children are extremely impressionable, and elimination of dating violence can only be achieved through cooperation of individuals, organizations, and communities; and

WHEREAS, the observance of February as Dating Violence Awareness Month provides an excellent opportunity to learn more about preventing dating violence and to show support for the numerous organizations and individuals who provide critical advocacy, services, and assistance to victims; and

WHEREAS, remaining silent about teen dating violence sends a message that it is acceptable, but by working together we can prevent this deplorable behavior:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim February 2010 as DATING VIOLENCE AWARENESS MONTH in Illinois, to bring attention to the serious issue of dating violence, which has been ignored for far too long, and to encourage all citizens to learn what they can do to prevent it.

Issued: January 21, 2010
Filed: January 22, 2010

2010-15
Four Chaplains Sunday

WHEREAS, on February 3, 1943, four United States Army Lieutenants and Chaplains sacrificed their lives in one of the most inspiring acts of heroism during the Second World War; and

WHEREAS, once a luxury coastal liner, the U.S.A.T. Dorchester set out with three escort ships on February 2 for an American base in Greenland. Less than 150 miles from its destination, the ship was attacked by a German submarine shortly after midnight; and

WHEREAS, aboard the U.S.A.T. Dorchester, panic and chaos set in. The blast killed scores of men, and many more were seriously wounded. Alerted that the Dorchester was taking on water and sinking rapidly, the captain gave the order to abandon ship; and
WHEREAS, those who were capable made their way towards the deck through the darkness. Once topside, men jumped from the ship for lifeboats. Some were overcrowded and capsized. Others drifted away before soldiers and sailors could get in them; and

WHEREAS, through the pandemonium, Reverend George L. Fox, Rabbi Alexander D. Goode, Reverend John P. Washington and Reverend Clark V. Poling spread out among the soldiers to calm the frightened, tend the wounded and guide the disoriented toward safety; and

WHEREAS, at one point, Rabbi Goode gave away his own gloves to a comrade who had the bad fortune of forgetting his. Shortly thereafter, the Chaplains opened a storage locker filled with lifejackets and began distributing them; and

WHEREAS, it was then that John Ladd witnessed an astonishing sight. When they ran out of lifejackets, the Chaplains removed theirs and gave them to four frightened young men. John said, 'It was the finest thing I have seen or hope to see this side of heaven;' and

WHEREAS, as the ship went down, other survivors in nearby rafts saw the Chaplains with arms linked and braced against the slanting deck. They were also heard offering prayers; and

WHEREAS, the Dorchester sunk less than 27 minutes after it was struck. Of the 902 men aboard, 672 died, including all four Chaplains. When news reached American shores, the nation was stunned by the magnitude of the tragedy and heroic conduct of the Chaplains; and

WHEREAS, all four Chaplains were posthumously awarded the Distinguished Service Cross and Purple Heart, as well as a Special Medal of Heroism specially authorized for them by Congress; and

WHEREAS, every year, the Combined Veterans Association of Illinois sponsors a memorial service for the four Chaplains, which this year is hosted by the Disabled American Veterans of Illinois, and which will be held at Our Lady of the Snows in Chicago, Illinois on February 7, 2010:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim February 7, 2010 as FOUR CHAPLAINS SUNDAY in Illinois, in honor and remembrance of the four brave and courageous Chaplains who selflessly made the ultimate sacrifice to save the lives of others.

Issued: January 21, 2010
Filed: January 22, 2010
Illinois Nurse Anesthetists Week

WHEREAS, Certified Registered Nurse Anesthetists (CRNAs) are essential to America's healthcare system, providing high-quality, cost-effective anesthesia care for more than 125 years; and

WHEREAS, CRNAs are anesthesia specialists who are the hands-on providers of approximately 30 million anesthetics given to patients each year in the United States; and

WHEREAS, CRNAs are the sole anesthesia providers in more than two-thirds of all rural hospitals, affording these medical facilities obstetrical, surgical, and trauma stabilization capabilities; and

WHEREAS, CRNAs practice in every setting in which anesthesia is delivered: traditional hospital surgical suites and obstetrical delivery rooms; ambulatory surgical centers; the offices of dentists, podiatrists, ophthalmologists, and plastic surgeons; U.S. Military, Public Health Services, and Veterans Affairs medical facilities:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim the week of January 24-30, 2010 as ILLINOIS NURSE ANESTHETISTS WEEK, urge all citizens to join me in recognizing these outstanding healthcare professionals for their contributions to the quality of life in our state.

Issued: January 21, 2010
Filed: January 22, 2010

2010-17
Kidney Cancer Awareness Week

WHEREAS, as of January 1, 2003 there were approximately 230,148 men and women living in the United States who had a history of renal cell carcinoma (RCC), also known as kidney cancer; and

WHEREAS, the exact cause of kidney cancer is still unknown, but the incidence rate is increasing by approximately three percent every year; and

WHEREAS, kidney cancer is among the ten most common cancers in both men and women; and

WHEREAS, kidney cancer occurs nearly twice as often in men as in women, and it mostly occurs in men over 40-years-old; and
WHEREAS, the American Cancer Society estimated in 2009 that 57,760 men and women would be diagnosed with kidney cancer and 12,980 would die from the disease; and

WHEREAS, there are currently no early detection tests that can detect the presence of kidney cancer; and

WHEREAS, signs and symptoms of kidney cancer may include: blood in the urine; lower back pain on one side (not from an injury); a mass or lump in the belly; tiredness; weight loss (if you are not trying to lose weight); fever that does not go away after a few weeks and that is not from a cold, the flu, or other infection; and swelling of ankles and legs. A doctor should be consulted if any of these problems are occurring; and

WHEREAS, other than surgery, the most commonly used treatments for kidney cancer are immunotherapy, radiation, and chemotherapy; and

WHEREAS, breakthroughs in research over the last year have given renewed hope to patients who previously had few treatment options:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim March 2010 as KIDNEY CANCER AWARENESS MONTH in Illinois, in support of this important public information campaign.

Issued: January 21, 2010
Filed: January 22, 2010

2010-18
Land Surveyors' Month

WHEREAS, the profession of land surveying is one of the oldest technical services associated with our society. Each year, our complex civilization depends more and more on land surveyors' skills and accuracy to determine property rights, method of design and construction; and

WHEREAS, the skills of George Washington, as a land surveyor, had a considerable influence on his job as Commander-in-Chief of our Revolutionary Forces, as the winning our nation's independence depended heavily on his planning of military operations and choice of selected battlefield sites; and

WHEREAS, more than 80 years later, when our country was threatened by a cruel division, another great President and former land surveyor, Abraham Lincoln, also used his land surveying skills to direct the war that preserved our nation; and
WHEREAS, it is important that we recognize the two 'Land Surveyor Presidents,' George Washington and Abraham Lincoln, during the Illinois Professional Land Surveyors Association 53rd Annual Conference, which will held in Springfield, Illinois, February 17 – 20, 2010 as we celebrate the birthdays of each President:

THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim February 2010 as LAND SURVEYORS' MONTH in Illinois, in recognition of the important services provided by land surveyors, and to congratulate the Illinois Professional Land Surveyors Association for their years of service to the profession of land surveying.

Issued: January 21, 2010
Filed: January 22, 2010

2010-19
The Salvation Army Month

WHEREAS, The Salvation Army first opened its doors in Chicago on March 1, 1885; and

WHEREAS, today The Salvation Army Metropolitan Division is the largest provider of direct social services to people in need in the Greater Chicago area, northern Illinois, and northwest Indiana; and

WHEREAS, The Salvation Army is a prominent provider of children's programs and services including Head Start, before- and after-school programs, music programs, and summer camps; and

WHEREAS, The Salvation Army feeding programs provide millions of hot and nutritious meals to the city's homeless people, senior citizens, and children; and

WHEREAS, The Salvation Army provides transitional housing to families and individuals who become homeless due to fires, floods, domestic violence, or other crises; and

WHEREAS, The Salvation Army Substance Abuse Recovery Program facilitates clients' long-term recovery from drug and alcohol abuse and successful re-entry into the community; and

WHEREAS, The Salvation Army Emergency Disaster Services provides disaster victims and emergency workers with food and drink and assists them with clean up operations; and

WHEREAS, The Salvation Army has been providing faithful and compassionate service to people in need for 125 continuous years without regard to race, religion, gender, or national origin:
THEREFORE, I, Pat Quinn, Governor of the State of Illinois, do hereby proclaim March 2010 as THE SALVATION ARMY MONTH in Illinois, and urge all citizens to acknowledge and thank The Salvation Army for 125 years of caring and compassionate service to people in need.

Issued: January 21, 2010
Filed: January 22, 2010
ILLINOIS ADMINISTRATIVE CODE
Issue Index - With Effective Dates

Rules acted upon in Volume 34, Issue 6 are listed in the Issues Index by Title number, Part number, Volume and Issue. Inquiries about the Issue Index may be directed to the Administrative Code Division at (217) 782-7017/18.

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**TOTAL AMOUNT OF ORDER** $ __________

☐ Check Make Checks Payable To: **Secretary of State**

☐ VISA  ☐ Master Card  ☐ Discover  (There is a $2.00 processing fee for credit card purchases.)

Card #: _____________________________ Expiration Date: _______

Signature: _____________________________

**Send Payment To:** Secretary of State  **Fax Order To:** (217) 557-8919

Department of Index  
Administrative Code Division  
111 E. Monroe  
Springfield, IL 62756

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