

NOTICE OF FINAL RULEMAKING
MARICOPA COUNTY AIR POLLUTION CONTROL REGULATIONS
REGULATION III – CONTROL OF AIR CONTAMINANTS
RULE 317: HOSPITAL/MEDICAL/INFECTIOUS WASTE INCINERATORS

PREAMBLE

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|------------------|---|--|
| <u>1.</u> | <u>Rule affected</u>
Rule 317: Hospital/Medical/Infectious Waste Incinerators | <u>Rulemaking action</u>
Rescind |
| <u>2.</u> | <u>Statutory authority for the rulemaking:</u>
Authorizing statutes: A.R.S. §§ 49-474, 49-479, and 49-480
Implementing Statute: A.R.S. § 49-112 | |
| <u>3.</u> | <u>The effective date of the rule:</u>
Date of adoption: December 13, 2017 | |
| <u>4.</u> | <u>List of public notices addressing the rulemaking:</u>
Notice of Briefing to Maricopa County Manager: May 15, 2017
Notice of Stakeholder Workshop: June 15, 2017
Notice of Maricopa County Board of Health Meeting: July 24, 2017
Notice of Proposed Rulemaking: 23 A.A.R. 2218, August 18, 2017 | |
| <u>5.</u> | <u>Name and address of department personnel with whom persons may communicate regarding the rulemaking:</u>
Name: Greg Verkamp or Hether Krause
Maricopa County Air Quality Department
Planning and Analysis Division
Address: 1001 N Central Avenue, Suite 125
Phoenix, AZ 85004
Telephone: (602) 506-6010
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E-mail: http://www.maricopa.gov/FormCenter/Regulatory-Outreach-17/Citizen-Comments-94 | |
| <u>6.</u> | <u>Explanation of the rule, including the department's reasons for initiating the rulemaking:</u>
The Maricopa County Air Quality Department (department) rescinded Rule 317 (Hospital/Medical/Infectious Waste Incinerators). Rule 317 was originally adopted April 7, 1993 and revised six times thereafter. The purpose of Rule 317 is to control emissions of air pollutants from hospital/medical/infectious waste incinerator(s) (HMIWI). There are currently no HMIWI in Maricopa County and the department's records indicate the last HMIWI permit was closed (source was removed) in 1998. The department does not anticipate any new HMIWI will locate to Maricopa County in the future. | |

Hospital/medical/infectious waste incineration was initially regulated under Rule 313 (Incinerators), however; county representatives determined Rule 313 lacked the necessary provisions to adequately characterize HMIWI and to adequately control their emissions. HMIWI differ from other incinerators in that they regularly burn large amounts of plastic (i.e. containers, bags, wrappings, and syringes). Rule 317 was adopted, in part, to add new temperature and residence time requirements to ensure effective combustions of the plastics. In addition, Rule 317 added emission limits, burning restrictions and monitoring requirements that were not part of Rule 313.

In 1997, the U.S. Environmental Protection Agency (EPA) promulgated new source performance standards (NSPS) and emission guidelines (EG) to reduce air emissions from HMIWI. The Department revised Rule 317 in 1999 to incorporate the new emission guidelines and bring the rule into conformity with the Clean Air Act. The August 1997 EPA fact sheet associated with the emission guidelines predicted the costs of complying with the new guidelines would force many facilities to choose alternative methods to treat and dispose of hospital/medical/infectious waste. The EPA predictions have proven to be true as the number of HMIWI in the United States has decreased significantly since the new standards and guidelines were promulgated. Most hospital/medical/infectious waste is now treated using alternative technologies such as thermal treatment (microwave technologies), steam sterilization (autoclaving) and chemical and mechanical treatment.

7. Demonstration of compliance with A.R.S. §49-112:

Under A.R.S. § 49-479(C), a county may not adopt a rule or ordinance that is more stringent than the rules adopted by the Director of the Arizona Department of Environmental Quality (ADEQ) for similar sources unless it demonstrates compliance with the applicable requirements of A.R.S. §49-112.

§ 49-112 County regulation; standards

§ 49-112(A)

When authorized by law, a county may adopt a rule, ordinance or regulation that is more stringent than or in addition to a provision of this title or rule adopted by the director or any board or commission authorized to adopt rules pursuant to this title if all of the following requirements are met:

1. The rule, ordinance or regulation is necessary to address a peculiar local condition.
2. There is credible evidence that the rule, ordinance or regulation is either;
 - (a) Necessary to prevent a significant threat to public health or the environment that results from a peculiar local condition and is technically and economically feasible.
 - (b) Required under a federal statute or regulation, or authorized pursuant to an intergovernmental agreement with the federal government to enforce federal statutes or regulations if the county rule, ordinance or regulation is equivalent to federal statutes or regulation.
3. Any fee or tax adopted under the rule, ordinance or regulation does not exceed the reasonable costs of the county to issue and administer the permit or plan approval program.

§ 49-112(B)

When authorized by law, a county may adopt rules, ordinances or regulations in lieu of a state program that are as stringent as a provision of this title or rule adopted by the director or any board or commission authorized to adopt rules pursuant to this title if the county demonstrates that the cost of obtaining permits or other approvals from the county will approximately equal or be less than the fee or cost of obtaining similar permits or approvals under this title or any rule adopted pursuant to this title. If the state has not adopted a fee or tax for similar permits or approvals, the county may adopt a fee when authorized by law in the rule, ordinance or regulation that does not exceed the reasonable costs of the county to issue and administer that permit or plan approval program.

The department is in compliance with A.R.S. §§ 49-112(A) and (B). The department rescinded Rule 317.

8. Documents and/or studies referenced and/or reviewed for this rulemaking:

Not applicable

9. Showing of good cause why the rule is necessary to promote a statewide interest if the rule will diminish a previous grant of authority of a political subdivision:

Not applicable

10. Summary of the economic, small business, and consumer impact:

The following discussion addresses each of the elements required for an economic, small business and consumer impact statement under A.R.S. § 41-1055.

An identification of the rulemaking.

This rulemaking rescinded Rule 317 (Hospital/ Medical/Infectious Waste Incinerators).

An identification of the persons who will be directly affected by, bear the costs of or directly benefit from the rulemaking.

This rulemaking rescinded Rule 317. There are currently no sources subject to Rule 317 in Maricopa County and the department does not anticipate any new sources will come to Maricopa County that would potentially be subject to Rule 317.

A cost benefit analysis of the following:

(a) The probable costs and benefits to the implementing agency and other agencies directly affected by the implementation and enforcement of the rulemaking.

Because this rulemaking does not impose any new compliance burdens on permitted regulated entities or introduce additional regulatory requirements, the department does not anticipate this rulemaking will have an economic impact on either the department or any other agency.

(b) The probable costs and benefits to a political subdivision of this state directly affected by the implementation and enforcement of the rulemaking

Because this rulemaking does not impose any new compliance burdens on permitted regulated entities or introduce additional regulatory requirements, the department does not anticipate this rulemaking will have an economic impact on any political subdivision of this state.

(c) The probable costs and benefits to businesses directly affected by the rulemaking, including any anticipated effect on the revenues or payroll expenditures of employers who are subject to the rulemaking.

Because this rulemaking does not impose any new compliance burdens on permitted regulated entities or introduce additional regulatory requirements, the department does not anticipate this rulemaking will have an economic impact on any businesses.

A general description of the probable impact on private and public employment in businesses, agencies and political subdivisions of this state directly affected by the rulemaking.

Because this rulemaking does not impose any new compliance burdens on permitted regulated entities or introduce additional regulatory requirements, the department does not anticipate this rulemaking will have an impact on private and public employment for any businesses, agencies or political divisions.

A statement of the probable impact of the rulemaking on small businesses.

Because this rulemaking does not impose any new compliance burdens on permitted regulated entities or introduce additional regulatory requirements, the department does not anticipate this rulemaking will have an economic impact on any small businesses.

(a) An identification of the small businesses subject to the rulemaking.

There are no small businesses subject to Rule 317.

(b) The administrative and other costs required for compliance with the rulemaking.

This rulemaking rescinded Rule 317; there are no costs required for compliance. There are no sources subject to Rule 317.

(c) A description of the methods that the agency may use to reduce the impact on small businesses.

(i) Establishing less costly compliance requirements in the rulemaking for small businesses.

This rulemaking rescinded Rule 317 and there are no compliance costs required for small businesses.

(ii) Establishing less costly schedules or less stringent deadlines for compliance in the rulemaking.

This rulemaking rescinded Rule 317 and there are no compliance costs required for small businesses.

(iii) Exempting small businesses from any or all requirements of the rulemaking.

This rulemaking rescinded Rule 317 and there are no compliance costs required for small businesses.

(d) The probable cost and benefit to private persons and consumers who are directly affected by the rulemaking.

This rulemaking does not impose any new compliance burdens on regulated entities that are permitted or introduce additional regulatory requirements and will not impose increased monetary or regulatory

costs on any permitted business, persons, or individuals so regulated. As such, there are no costs to pass through to consumers, which means there are no impacts on consumers.

A statement of the probable effect on state revenues.

The rulemaking will not impose increased monetary or regulatory costs on other state agencies, political subdivisions of this state, persons, or individuals so regulated. Without costs to pass through to customers, there is no projected change in consumer purchase patterns and, thus, no impact on state revenues from sales taxes.

A description of any less intrusive or less costly alternative methods of achieving the purpose of the rulemaking.

This rulemaking rescinded Rule 317 and there are no compliance costs associated with the rulemaking.

11. Name and address of department personnel with whom persons may communicate regarding the accuracy of the economic, small business, and consumer impact:

Name: Greg Verkamp or Hether Krause
Maricopa County Air Quality Department
Planning and Analysis Division
Address: 1001 N Central Avenue, Suite 125
Phoenix, AZ 85004
Telephone: (602) 506-6010
Fax: (602) 506-6179
E-mail: <http://www.maricopa.gov/FormCenter/Regulatory-Outreach-17/Citizen-Comments-94>

12. Description of the changes between the proposed rule, including supplemental notices and final rule:

No additional changes were made, since the Notice of Proposed Rulemaking was published on August 18, 2017 (23 A.A.R. 2218).

13. Summary of the comments made regarding the rule and the department response to them:

No comments were submitted during the 30-day comment period – August 18-September 18, 2017.

14. Any other matters prescribed by statute that are applicable to the specific department or to any specific rule or class of rules:

Not applicable

15. Incorporations by reference and their location in the rule:

Not applicable

16. Was this rule previously an emergency rule?

No

17. Full text of the rule follows:

REGULATION III—CONTROL OF AIR CONTAMINANTS

RULE 317

HOSPITAL/MEDICAL/INFECTIOUS WASTE INCINERATORS

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Revised 11/19/03
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Revised 09/16/09
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MARICOPA COUNTY
AIR POLLUTION CONTROL REGULATIONS
REGULATION III — CONTROL OF AIR CONTAMINANTS

RULE 317

HOSPITAL/MEDICAL/INFECTIOUS WASTE INCINERATORS

SECTION 100 — GENERAL

- 101 PURPOSE:** To control emissions of air pollutants from Hospital/Medical/Infectious Waste incinerators.
- 102 APPLICABILITY:** A Hospital/Medical/Infectious Waste Incinerator (HMIWI) commenced on or before June 20, 1996, or for which construction commenced on or before June 20, 1996, shall comply with this rule unless it fits any one of the following exceptions:
 - 102.1** A combustor is not subject to this rule when only pathological waste, low level radioactive waste, and/or chemotherapeutic waste is burned, provided the owner or operator of the combustor:
 - a.** Notifies the Control Officer of an exemption claim; and
 - b.** Keeps records on a calendar quarter basis of the periods of time when only pathological waste, low level radioactive waste, and/or chemotherapeutic waste is burned.
 - 102.2** Any co-fired combustor is not subject to this rule if the owner or operator of the co-fired combustor:
 - a.** Notifies the Control Officer of an exemption claim; and

- ~~b. Provides an estimate of the relative weight of hospital waste, medical/infectious waste, and other fuels and/or wastes to be combusted; and~~
- ~~e. Keeps records on a calendar quarter basis of the weight of hospital waste and medical/infectious waste combusted, and the weight of all other fuels and wastes combusted at the co-fired combustor.~~

~~102.3 Any combustor required to have a permit under Title 42, United States Code (U.S.C.), Section 6925, Section 3005 of the Solid Waste Disposal Act is not subject to this rule.~~

~~102.4 Any combustor which meets the applicability requirements under 40 CFR 60, Subparts Cb, Ea, or Eb (standards or guidelines for certain municipal waste combustors) is not subject to this rule.~~

~~102.5 Any pyrolysis unit is not subject to this rule.~~

~~102.6 Cement kilns firing hospital waste or medical/infectious waste are not subject to this rule.~~

~~102.7 Physical or operational changes made to an existing HMIWI unit solely for the purpose of complying with emission guidelines under this rule are not considered a modification and do not result in an existing HMIWI unit becoming subject to the provisions of 40 CFR 60, Subpart Ee.~~

~~102.8 HMIWI subject to this Section are not subject to Rule 313.~~

- ~~a. A crematory whose incinerator burns only human remains is not a HMIWI and is not subject to this rule. It is subject to Rule 313. However, if the incinerator burns 10 percent or less of hospital waste and medical/infectious waste, it is a co-fired combustor subject only to notification and recordkeeping requirements, as specified in Section 102.2.c of this rule. If the incinerator burns more than 10 percent hospital waste and medical/infectious waste, it is subject to all of the requirements of this rule.~~

- ~~b. Any co-fired combustor or combustor that is not subject to this rule is still subject to Rule 313. (See Applicability, Sections 102.2, 102.3 and 102.4 of this rule.)~~

~~103 **AVAILABILITY OF INFORMATION:** Copies of the CFR referenced in this rule are available at the Maricopa County Air Quality Department, 1001 N. Central Ave., Phoenix, AZ, 85004, or by calling (602) 506-0169 for information.~~

~~**SECTION 200 – DEFINITIONS:** See Rule 100 of these rules for definitions of terms that are used but not specifically defined in this rule. For the purpose of this rule, the following definitions shall apply:~~

~~201 **BATCH HMIWI**—An HMIWI that is designed such that neither waste charging nor ash removal can occur during combustion.~~

~~202 **BIOLOGICALS**—Preparations made from living organisms and their products. This includes vaccines, cultures, etc., intended for use in diagnosing, immunizing, or treating humans or animals or in research.~~

~~203 **BLOOD PRODUCTS**—Any product derived from human blood, including, but not limited to, blood plasma, platelets, red or white blood corpuscles, and other derived licensed products, such as interferon, etc.~~

~~204 **BODY FLUIDS**—Liquid emanating or derived from humans and limited to blood; dialysate; amniotic, cerebrospinal, synovial, pleural, peritoneal and pericardial fluids; and semen and vaginal secretions.~~

- 205 **CHEMOTHERAPEUTIC WASTE**—Waste material resulting from the production or use of antineoplastic agents used for the purpose of stopping or reversing the growth of malignant cells.
- 206 **CO-FIRED COMBUSTOR**—A unit combusting hospital waste and/or medical/infectious waste with other fuels or wastes (e.g., coal, municipal solid waste) and subject to an enforceable requirement limiting the unit to combusting a fuel feed stream, 10 percent or less of the weight of which is comprised, in aggregate, of hospital waste and medical/infectious waste as measured on a calendar quarter basis. For purposes of this definition, pathological waste, chemotherapeutic waste, and low-level radioactive waste are considered “other” wastes when calculating the percentage of hospital waste and medical/infectious waste combusted.
- 207 **CONTINUOUS HMIWI**—An HMIWI that is designed to allow waste charging and ash removal during combustion.
- 208 **CREMATORY**—An incinerator used for the cremation of human and animal bodies, their body parts, and for the incineration of associated animal bedding.
- 209 **DIOXINS/FURANS**—The combined emissions of tetra through octa chlorinated dibenzo para-dioxins and dibenzofurans, as measured by the EPA Reference Method 23, found in 40 CFR Part 60, Appendix A.
- 210 **HOSPITAL**—Any facility which has an organized medical staff, maintains at least six inpatient beds, and where the primary function of the institution is to provide diagnostic and therapeutic patient services and continuous nursing care primarily to human inpatients who are not related and who stay on average in excess of 24 hours per admission. This definition does not include facilities maintained for the sole purpose of providing nursing or convalescent care to human patients who generally are not acutely ill but who require continuing medical supervision.
- 211 **HOSPITAL/MEDICAL/INFECTIOUS WASTE INCINERATOR OR HMIWI OR HMIWI UNIT**—Any device that combusts any amount of hospital waste or medical/infectious waste.
- 212 **HOSPITAL/MEDICAL/INFECTIOUS WASTE INCINERATOR OPERATOR OR HMIWI OPERATOR**—Any person who operates, controls or supervises the day-to-day operation of an HMIWI.
- 213 **HOSPITAL WASTE**—Discards generated at a hospital, except unused items returned to the manufacturer. The definition of hospital waste does not include human corpses, remains, and anatomical parts that are intended for interment or cremation.
- 214 **INFECTIOUS AGENT**—Any organism (such as a virus or bacteria) that is capable of being communicated by invasion and multiplication in body tissues and capable of causing disease or adverse health impacts in humans.
- 215 **INTERMITTENT HMIWI**—An HMIWI that is designed to allow waste charging, but not ash removal, during combustion.
- 216 **LARGE HMIWI:**
- 216.1 Except as provided in Section 216.2:
- a. An HMIWI whose maximum design waste burning capacity is more than 500 pounds per hour; or

- b. A continuous or intermittent HMIWI whose maximum charge rate is more than 500 pounds per hour; or
- e. A batch HMIWI whose maximum charge rate is more than 4,000 pounds per day.

216.2 Each of the following is not a large HMIWI:

- a. A continuous or intermittent HMIWI whose maximum charge rate is less than or equal to 500 pounds per hour; or
- b. A batch HMIWI whose maximum charge rate is less than or equal to 4,000 pounds per day.

217 ~~**LOW-LEVEL RADIOACTIVE WASTE**—Waste material which contains radioactive nuclides emitting primarily beta or gamma radiation, or both, in concentrations or quantities that exceed applicable federal or state standards for unrestricted release. Low-level radioactive waste is not high-level radioactive waste, spent nuclear fuel, or by-product material as defined by the Atomic Energy Act of 1954 (42 U.S.C. 2014(e)(2)).~~

218 **MAXIMUM CHARGE RATE:**

- 218.1** For continuous and intermittent HMIWI, 110 percent of the lowest 3-hour average charge rate measured during the most recent performance test demonstrating compliance with all applicable emission limits.
- 218.2** For batch HMIWI, 110 percent of the lowest daily charge rate measured during the most recent performance test demonstrating compliance with all applicable emission limits.

219 **MAXIMUM DESIGN WASTE BURNING CAPACITY:**

219.1 For intermittent and continuous HMIWI, $C = P_v \times 15,000 / 8,500$

Where:

C = HMIWI capacity, lb/hr

P_v = primary chamber volume, ft^3

15,000 = primary chamber heat release rate factor, $Btu/ft^3/hr$

8,500 = standard waste heating value, Btu/lb .

219.2 For batch HMIWI, $C = PV \times 4.5 / 8$

Where:

C = HMIWI capacity, lb/hr

PV = primary chamber volume, ft^3

4.5 = waste density, lb/ft^3

8 = typical hours of operation of a batch HMIWI.

220 ~~**MEDICAL/INFECTIOUS WASTE**—Any waste generated in the diagnosis, treatment, or immunization of human beings or animals, in research, or in the production or testing of biologicals that is listed in Sections 220.1 through 220.7 of this rule. The definition of medical/infectious waste does not include hazardous waste identified or listed under the regulations in 40 CFR Part 261; household waste, as defined in 40 CFR 261.4(b)(1); ash from incineration of medical/infectious waste, once the incineration process has~~

been completed; human corpses, remains, and anatomical parts that are intended for interment, cremation; and domestic sewage materials identified in 40 CFR 261.4(a)(1). Medical/infectious waste does include:

220.1 Cultures and stocks of infectious agents and associated biologicals, including: cultures from medical and pathological laboratories; cultures and stocks of infectious agents from research and industrial laboratories; wastes from the production of biologicals; discarded live and attenuated vaccines; and culture dishes and devices used to transfer, inoculate, and mix cultures.

220.2 Human pathological waste, including tissues, organs, and body parts and body fluids that are removed during surgery or autopsy, or other medical procedures, and specimens of body fluids and their containers.

220.3 Human blood and blood products including:

a. Liquid waste human blood;

b. Products of blood;

c. Items saturated and/or dripping with human blood; or

d. Items that were saturated and/or dripping with human blood that are now caked with dried human blood; including serum, plasma, and other blood components, and their containers, which were used or intended for use in either patient care, testing and laboratory analysis or the development of pharmaceuticals. Intravenous bags are also included in this category.

220.4 Sharps that have been used in animal or human patient care or treatment or in medical, research, or industrial laboratories, including hypodermic needles, syringes (with or without the attached needle), pasteur pipettes, scalpel blades, blood vials, needles with attached tubing, and culture dishes (regardless of presence of infectious agents). Also included are other types of broken or unbroken glassware that were in contact with infectious agents, such as used slides and cover slips.

220.5 Animal waste including contaminated animal carcasses, body parts, and bedding of animals that were known to have been exposed to infectious agents during research (including research in veterinary hospitals), production of biologicals or testing of pharmaceuticals.

220.6 Isolation wastes including biological waste and discarded materials contaminated with blood, excretions, exudates, or secretions from humans who are isolated to protect others from certain highly communicable diseases, or isolated animals known to be infected with highly communicable diseases.

220.7 Unused sharps including the following unused, discarded sharps: hypodermic needles, suture needles, syringes, and scalpel blades.

221 MEDIUM HMIWI:

221.1 Except as provided in Section 221.2:

a. An HMIWI whose maximum design waste burning capacity is more than 200 pounds per hour but less than or equal to 500 pounds per hour; or

- b. A continuous or intermittent HMIWI whose maximum charge rate is more than 200 pounds per hour but less than or equal to 500 pounds per hour; or
- e. A batch HMIWI whose maximum charge rate is more than 1,600 pounds per day but less than or equal to 4,000 pounds per day.

221.2 The following are not medium HMIWI:

- a. A continuous or intermittent HMIWI whose maximum charge rate is less than or equal to 200 pounds per hour or more than 500 pounds per hour; or
- b. A batch HMIWI whose maximum charge rate is more than 4,000 pounds per day or less than or equal to 1,600 pounds per day.

222 **~~PATHOLOGICAL WASTE~~**—Waste material consisting of only human or animal remains, anatomical parts, and/or tissue, the bags/containers used to collect and transport the waste material, and animal bedding (if applicable).

223 **~~PYROLYSIS~~**—The endothermic gasification of hospital waste or medical/infectious waste using external energy.

224 **~~SHUTDOWN~~**—The period of time after all waste has been combusted in the primary chamber. For continuous HMIWI, shutdown shall commence no less than 2 hours after the last charge to the incinerator. For intermittent HMIWI, shutdown shall commence no less than 4 hours after the last charge to the incinerator. For batch HMIWI, shutdown shall commence no less than 5 hours after the high air phase of combustion has been completed.

225 **~~SMALL HMIWI:~~**

225.1 Except as provided in Section 225.2:

- a. An HMIWI whose maximum design waste burning capacity is less than or equal to 200 pounds per hour; or
- b. A continuous or intermittent HMIWI whose maximum charge rate is less than or equal to 200 pounds per hour; or
- e. A batch HMIWI whose maximum charge rate is less than or equal to 1,600 pounds per day.

225.2 The following are not small HMIWI:

- a. A continuous or intermittent HMIWI whose maximum charge rate is more than 200 pounds per hour; or
- b. A batch HMIWI whose maximum charge rate is more than 1,600 pounds per day.

SECTION 300 – STANDARDS

301 **~~HMIWI STANDARDS:~~** An existing HMIWI covered by this Section shall comply with 40 CFR 60, Subpart Ec, and all accompanying appendices, as modified by this subsection. 40 CFR 60, Subpart Ec “Standards of Performance for Hospital/Medical/Infectious Waste Incinerators for Which Construction is Commenced After June 20, 1996” is incorporated by reference in Rule 360 of the Maricopa County Air Pollution Control Regulations. Each owner or operator of an affected facility shall comply with the requirements of 40 CFR 60, Subpart Ec, as adopted and, where applicable, revised herein.

302 HMIWI EMISSIONS GUIDELINES: An HMIWI shall comply with the emissions guidelines listed in Table 317.1 below:

Table 317.1. Emission Limits for Small, Medium, and Large HMIWI.

Pollutant	Units (7% oxygen, dry basis)	Emission Limits (by HMIWI size)		
		Small	Medium	Large
Cadmium	Milligrams per dry standard cubic meter (grains per thousand dry standard cubic feet) or percent reduction	0.16 (0.07) or 65%	0.16 (0.07) or 65%	0.16 (0.07) or 65%
Carbon monoxide	Parts per million by volume	40	40	40
Dioxins/furans	Nanograms per dry standard cubic meter total dioxins/furans (grains per billion dry standard cubic feet) or nanograms per dry standard cubic meter TEQ (grains per billion dry standard cubic feet)	125 (55) or 2.3 (1.0)	125 (55) or 2.3 (1.0)	125 (55) or 2.3 (1.0)
Hydrogen chloride	Parts per million by volume or percent reduction	100 or 93%	100 or 93%	100 or 93%
Lead	Milligrams per dry standard cubic meter (grains per thousand dry standard cubic feet) or percent reduction	1.2 (0.52) or 70%	1.2 (0.52) or 70%	1.2 (0.52) or 70%
Mercury	Milligrams per dry standard cubic meter (grains per thousand dry standard cubic feet) or percent reduction	0.55 (0.24) or 85%	0.55 (0.24) or 85%	0.55 (0.24) or 85%
Nitrogen oxides	Parts per million by volume	250	250	250
Particulate matter	Milligrams per dry standard cubic meter (grains per dry standard cubic foot)	115 (0.05)	69 (0.03)	34 (0.015)
Sulfur dioxide	Parts per million by volume	55	55	55

303 OPACITY: No owner or operator of an HMIWI shall cause to be discharged into the atmosphere from the stack of that HMIWI any gases that exhibit greater than 10 percent opacity (6 minute block average) or darker than 20 percent opacity for an aggregate of more than 30 seconds in any consecutive 60 minutes.

304 LARGE HMIWI OPACITY: A large HMIWI shall comply with the opacity requirements as specified in 40 CFR 60, Sections 60.52c(e), (d), and (e).

305 ~~**NIGHT BURNING:** No person shall operate a medical waste incinerator between sunset and the following sunrise unless a continuous opacity (particulate) recorder is operating at all times when there is any combustion within the incinerator. Such recorder shall be in compliance with Section 501.1 of this rule.~~

306 ~~**INCORPORATION BY REFERENCE:** All CFR references as of July 1, 2009 that are listed below and in various sections of this rule are adopted and incorporated by reference. These adoptions by reference include no future editions or amendments. Copies of these CFR references are available at the Maricopa County Air Quality Department, 1001 N. Central Ave., Phoenix, AZ, 85004, or by calling (602) 506-0169 for information.~~

~~40 CFR 60, Subpart Ee~~

~~40 CFR 60, Sections 60.52c(e), (d), and (e)~~

~~40 CFR 60, Section 60.56e~~

~~40 CFR 60, Section 60.57e~~

~~40 CFR 60, Sections 60.58c(b), (c), (d), (e), and (f)~~

~~40 CFR 60, Appendix A and Appendix B~~

~~40 CFR 70~~

SECTION 400 – ADMINISTRATIVE REQUIREMENTS

401 ~~**COMPLIANCE SCHEDULE:** On the effective date of an EPA approved operating permit program under Clean Air Act Title V and the implementing regulations under 40 CFR 70 in Arizona, whichever date is later, designated facilities subject to this rule shall operate pursuant to a permit issued under the EPA approved operating permit program.~~

SECTION 500 – MONITORING AND RECORDS

501 ~~**PROVIDING AND MAINTAINING MONITORING DEVICES:** Except as provided in Section 502, all requirements for compliance and performance testing listed in 40 CFR 60.56e shall be required of each HMIWI, excluding the fugitive emissions testing requirements under Sections 60.56c(b)(12) and (c)(3).~~

501.1 ~~Any person subject to Section 304 of this rule shall operate and maintain all of the following continuous data recording systems. All required systems shall be completely and properly operating during all periods of combustion within the incinerator, and each shall include a real-time recording device that creates a clear, legible record at all times of operation.~~

501.2 ~~Opacity of stack emissions or other indicator of particulate matter which is approved by the Control Officer. Pursuant to Section 305 of this rule, any incinerator burning after sunset must be equipped with a continuously recording opacity monitor, regardless of capacity. The opacity monitor shall be located after (downstream of) all control equipment, prior to the stack exit, and prior to any dilution with ambient air. The opacity monitor shall at all times comply with the EPA Performance Specification 1 (40 CFR 60, Appendix B) and shall be calibrated no less than once each day.~~

502 ~~**RECORDKEEPING AND REPORTING:** Each HMIWI shall comply with the requirements listed in 40 CFR 60.58c(b), (c), (d), (e), and (f), excluding 40 CFR 60.58c(b)(2)(ii) (fugitive emissions) and (b)(7) (siting).~~

503 ~~**HMIWI MONITORING REQUIREMENTS:** An existing HMIWI shall comply with the monitoring requirements of 40 CFR 60.57e.~~