

insurer shall offer all such existing policyholders the option to exchange their policy, as provided by Rule 69O-157.1100, F.A.C., for a partnership policy.

(b) Any policyholder that exchanges their policy shall be provided the required disclosure as provided in subsection (2) above.

(c) The effective date of the partnership policy shall be the date of the exchanged policy.

(4) The issued policy shall meet the following inflation coverage limitations:

(a) Policies or certificates issued to an individual who has not yet attained age 61 shall contain annual compound inflation coverage.

(b) Policies or certificates issued to an individual who has attained age 61 but has not attained age 76 shall contain annual inflation coverage.

(c) For policies or certificates issued with inflation coverage, the policyholders or certificateholders must have the inflation coverage at a level based upon the insured's current age as described in paragraphs (a) and (b) above.

(5) Reporting.

(a) All insurers shall report to the Health and Human Services Secretary such information as required by Centers for Medicare & Medicaid Services (CMS), including but not limited to:

1. Notification regarding when insurance benefits provided under partnership plans have been paid and the amount of such benefits paid, and

2. Notification regarding when such policies otherwise terminate.

(b) All insurers shall provide to any insured requesting such information a copy of the Form OIR-B2-1781 (12/06), Approved Long-Term Care Partnership Program Policy Summary, which is hereby adopted and incorporated into this rule by reference. An insurer may use its own form as long as the information and content is consistent with the information contained in Form OIR-B2-1781 (12/06).

Specific Authority 624.308(1), 627.9408(1), 627.94075 FS. Law Implemented 624.307(1), 409.9102, 627.94075 FS. History—New _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Frank Dino, Actuary, Bureau of Life and Health Forms and Rates, Office of Insurance Regulation

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Rich Robleto, Deputy Commissioner, Life & Health Product Review, Office of Insurance Regulation

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 13, 2007

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 22, 2006

Section III Notices of Changes, Corrections and Withdrawals

DEPARTMENT OF REVENUE

RULE NO.: 12-26.008
RULE TITLE: Public Use Forms

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 32, No. 52, December 29, 2006 issue of the Florida Administrative Weekly.

In response to public comments made a part of the public record, the following changes to proposed subsections (4) and (5) of Rule 12-26.008, F.A.C., have been made to incorporate, by reference, changes to Form DR-26S, Sales and Use Tax Application for Refund, and to Form DR-370026, Mutual Agreement to Audit or Verify Refund Claim, so that, when adopted, those subsections will read as follows:

Number	Title	Effective Date
(4) DR-26S	Application for Refund-Sales and Use Tax (R. 04/07 04/03)	____ 09/04
(5) DR-370026	Mutual Agreement to Audit or Verify Refund Claim (R. 04/07 07/02)	____ 09/04

The following changes to Form DR-26S, Sales and Use Tax Application for Refund, have been made, so that, when adopted, those changes will be made a part of the "R. 04/07" version of that form incorporated by reference in subsection (4) of Rule 12-26.008, F.A.C.:

On page 2, Question 1, Who can apply for a refund?, the following will be added to the end of the response: See Page 8, Exempt Issues.

On page 5, Section I., Amended returns, the following statement will be removed:

~~This refund may be taken as a credit on your next return (see FAQ #3)~~

On page 6, Section V., Credit Memo, the following statement and note box will be removed:

~~This refund may be taken as a credit on your next return (see FAQ #3)~~

~~NOTE: This refund basis should be used to claim overpayment of tiered penalty or collection allowances not taken on the return. If the credit memo issued was due to an amended return filed, please refer to the Amended Return instructions.~~

The following changes to Form DR-370026, Mutual Agreement to Audit or Verify Refund Claim, have been made, so that, when adopted, those changes will be made a part of the "R. 04/07" version of that form incorporated by reference in subsection (5) of Rule 12-26.008, F.A.C.:

employer's processor must match the identifying information in the State Disbursement Unit computer system. The State Disbursement Unit will work with the employer to resolve discrepancies, if any are found. For the employer to establish ACH payments to the State Disbursement Unit, through an employer processor, the employer must contact the processor directly. For employer's using a processor, the processor is responsible for verifying the information.

(c) The employer or the employer's processor must provide the State Disbursement Unit with the following information for each obligor for whom payments will be remitted:

1. Obligor first and last name;
2. Obligor Social Security Number;
3. Obligee first and last name; and
4. Case identifier.

(d) The State Disbursement Unit will inform the employer or employer's processor of the following when there is a match of the information listed in paragraph (c).

1. State Disbursement Unit's banking information to send payments electronically; and
2. That electronic remittance of support payments may commence.

(e) Neither the State Disbursement Unit nor the Department will pay for expenses incurred by the employer or employer's processor to use the ACH credit method. Pursuant to Section 61.1301(2)(e)6., F.S., the employer may collect a fee from the employee's income for each withheld payment.

(f) To assure the receipt of support payments by the due date, an employer or the employer's processor must initiate the payment transaction in accordance with subsection (6).

(g) All ACH credit transfers must be in the NACHA Cash Concentration and Disbursement Plus "CCD+" or NACHA Corporate Trade Exchange "CTX" format containing an Accredited Standards Committee (ASC) X12 820 Payment Order/Remittance Advice Transaction Set with associated addenda record(s) for child support, in the format specified by NACHA guidelines as referenced herein. The Department uses NACHA guidelines to govern the formats and specifications for the electronic remittance of support payments and the electronic submission of associated case data, which are contained in the User Guide For Electronic Child Support Payments, Using The Child Support Application Banking Convention, Version 5.0, revised August 21, 2006, incorporated herein by reference. Members of the public may obtain a copy of the NACHA guidelines by writing to the Florida Department of Revenue, Child Support Enforcement Program, Attn: Forms Coordinator, P. O. Box 8030, Tallahassee, Florida, 32314-8030, or by accessing <http://www.nacha.org/>. The employer, employer's financial institution, or the employer's processor providing ACH services may contact the State Disbursement Unit, EFT

Marketing, at (850)205-8227 to determine the formats, standards, and technical requirements to implement this provision.

(h) The electronic record shall include the following associated case data fields.

1. Segment identifier – A unique identifier for a segment composed of a combination of two or three uppercase letters and digits. "DED" is the segment identifier.

2. Application identifier – The type of deduction withheld from an employee's pay. "CS" is the application identifier.

3. Case identifier – The unique identifier composed of alpha and numeric characters based on the court order number.

4. Pay date – The date the income was withheld from the employee's paycheck.

5. Payment amount – The amount of support withheld from the employee's income for a specific pay period, which is paid to the State Disbursement Unit.

6. Noncustodial parent Social Security Number.

7. Medical support indicator – The indicator designates whether the employer offers family medical insurance coverage. If medical insurance coverage is available, place a 'Y' in the field; if there is no coverage available, place an 'N' in the field. The National Automated Clearing House Association standard requires this data element.

8. Noncustodial parent name.

9. Federal Information Processing Standard Code (FIPS code) – The unique code that identifies each child support jurisdiction (i.e., states, counties and central registries). As used in this rule, the FIPS code refers to the code of the State Disbursement Unit receiving the transaction.

10. Employment termination indicator – The employment termination indicator notifies the Department that an individual's employment has terminated. The employer is required to report this information pursuant to Section 61.1301(2)(k), F.S. If the employee has terminated, place a 'Y' in this field; otherwise, the field is not used.

(i) The employer or employer's processor may combine payment amounts from more than one employee in a single payment as long as the required information in subsection (5)(h), subparagraph 1. through 10., is submitted for each employee. In addition, the employer or employer's processor must separately identify the portion of the single payment that is attributable to each employee.

Paragraph (b) of subsection (6) of Rule 12E-1.032, F.A.C., has been changed, so that, when adopted, the paragraph will read as follows:

(b) The employer or employer's processor who is required to pay support and provide associated case data through electronic means must initiate the transfer so that the amount due is deposited as collected funds to the State Disbursement Unit's account on or before the due date. If the date on which the employer or employer's processor is required to initiate an ACH credit transfer falls on a Saturday, Sunday, or a business

or banking holiday, the employer or the employer's processor must initiate the transaction on the preceding business day. For the purpose of this rule, "banking day" has the meaning prescribed in Section 674.104(1), F.S.

BOARD OF TRUSTEES OF THE INTERNAL IMPROVEMENT TRUST FUND

Notices for the Board of Trustees of the Internal Improvement Trust Fund between December 28, 2001 and June 30, 2006, go to <http://www.dep.state.fl.us/> under the link or button titled "Official Notices."

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Cosmetology

RULE NO.: 61G5-24.005 RULE TITLE: Salon License Fee

NOTICE OF CORRECTION

Notice is hereby given that the following correction has been made to the proposed rule in Vol. 33, No. 11, March 16, 2007 issue of the Florida Administrative Weekly.

In the "DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW" block, the date "February 20, 2007" should have been "March 2, 2007".

The person to be contacted regarding the above change is Robyn Barineau, Executive Director, Board of Cosmetology, 1940 North Monroe Street, Tallahassee, Florida 32399-0750.

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Notices for the Department of Environmental Protection between December 28, 2001 and June 30, 2006, go to <http://www.dep.state.fl.us/> under the link or button titled "Official Notices."

DEPARTMENT OF HEALTH

Board of Pharmacy

RULE NO.: 64B16-28.451 RULE TITLE: Pharmacy Common Database

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 32, No. 45, November 9, 2006 issue of the Florida Administrative Weekly.

The change is in response to written comments submitted by the staff of the Joint Administrative Procedures Committee. The changes are as follows:

1. Subsection (1) shall now read as follows:

(1) A pharmacy licensed under this chapter may perform prescription drug processing for other pharmacies, provided that all pharmacies are under common ownership, utilize a common database, and are properly licensed, permitted or registered in this state or another state. Nothing in this

subsection shall prohibit a pharmacist employee of said pharmacies who is licensed in Florida or in another state from remotely accessing the pharmacy's electronic database from outside the pharmacy in order to process prescriptions, provided the pharmacy establishes controls to protect the privacy and security of confidential records.

2. The introductory phrase to subsection (2) shall now read as follows:

(2) Prescription drug processing includes, but is not limited to, the following:

3. A new subsection (3) shall be added to read as follows:

(3) Each pharmacist that performs a specific function within the prescription drug processing process via use of a common database shall be responsible for any errors or omissions committed by that pharmacist during the performance of that specific function.

4. The originally published subsections (3) through (5) shall be renumbered as (4) through (6).

5. §465.005 will be added to the specific authority. §465.05 will be removed from the specific authority.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Rebecca Poston, Executive Director, Board of Pharmacy, 4052 Bald Cypress Way, Bin #C04, Tallahassee, Florida 32399-3254

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Economic Self-Sufficiency Program

RULE NO.: 65A-1.205 RULE TITLE: Eligibility Determination Process

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 33, No. 12, March 23, 2007 issue of the Florida Administrative Weekly.

Notice is hereby given that the following changes have been made to the proposed rule published in Vol. 33, No. 5, February 2, 2007, issue of the Florida Administrative Weekly, in accordance with subparagraph 120.54(3)(d)1., F.S. The specific changes were made in response to the comments received from the Joint Administrative Procedures Committee. Specific changes in the rule text are as follows:

(1)(b) Time standards for processing applications vary by public assistance program in accordance with federal regulations 7 CFR 273.2(g) (food stamps), 45 CFR 206.10(a)(3)(i), (temporary cash assistance), and 42 CFR 435.911 (Medicaid). Time standards begin on the date of application and end on the date benefits are made available or a notice of ineligibility is mailed. For the Medicaid program, the time standard ends on the date an eligibility notice is mailed. Applications must be processed and determinations of eligibility made within the following time frames.

Application Processing Program	Time Standards
Expedited Food Stamps	7 days
Food Stamps	30 days
Temporary Cash Assistance, Refugee Assistance and Child In Care	45 days
Medical Assistance and State Funded Programs for individuals who apply on the basis of disability	90 days
For all other Medical Assistance and State Funded Programs for applicants on the basis of non-disability eligibility, including <u>OSS</u> , OMB, SLMB, and OII	45 days

All days counted after the date of application are calendar days. Applicant delay days do not count in determining non-compliance with the time standard. See paragraph (d) of this rule. Information provided on form CF-ES 2930, Screening for Expedited Medicaid Appointments, ~~Apr 07~~ ~~05~~, incorporated by reference, ~~in Administrative Rule 65A-1.400~~ is used in determining expedited processing of Medicaid disability-related applications.

~~(1)(e) For Medicaid, every individual who indicates they are a U.S. citizen must provide documentation of U.S. citizenship and identify. Exceptions are those who receive or have received SSI or Medicare and presumptively eligible women or newborns.~~

(5) Information provided by the applicant or recipient must be substantiated, verified or documented as part of each determination of eligibility. The term verification is used generically to represent this process. For any program, when there is a question about eligibility or the information provided, it is the sole discretion of the department will ask for documentation, verification or substantiation as required to determine if the factor of eligibility and questionable nature of the information dictates whether or not substantiation, verification or documentation is. Verification or documentation of substantiated information is not precluded or prohibited under any circumstances, including circumstances where eligibility information provided by an applicant or recipient appears to have been verified. If verification or documentation is requested, the information about which verification or documentation is sought will not be accepted as proof of the truth, validity, or accuracy of the questioned information if verification or documentation is not received.

(7) Copies of referenced forms and brochure CF/PI 165-107, Notification of Disability Information and Request (information for disabled applying for Medicaid) may be obtained from the ACCESS Florida Program Office, 1317 Winewood Boulevard, Building 3, Room 406, Tallahassee, Florida 32399-0700 or on the department's web site at http://www.dcf.state.fl.us/ef_web/publications and click on e-forms, then search alphabetically using the title of the form.

DEPARTMENT OF FINANCIAL SERVICES

Division of State Fire Marshal

RULE NO.: 69A-3.012
 RULE TITLE: Standards of the National Fire Protection Association and Other Standards Adopted

NOTICE OF WITHDRAWAL

Notice is hereby given that the above rule, as noticed in Vol. 32, No. 51, December 22, 2006 issue of the Florida Administrative Weekly has been withdrawn.

**Section IV
 Emergency Rules**

BOARD OF TRUSTEES OF THE INTERNAL IMPROVEMENT TRUST FUND

Notices for the Board of Trustees of the Internal Improvement Trust Fund between December 28, 2001 and June 30, 2006, go to <http://www.dep.state.fl.us/> under the link or button titled "Official Notices."

DEPARTMENT OF THE LOTTERY

RULE NO.: 53ER07-22
 RULE TITLE: Instant Game Number 687, 1 FOR THE MONEY; 2 FOR THE DOUGH; 3 TO GET WINNING; 4 IN A ROW

SUMMARY OF THE RULE: This emergency rule describes Instant Game Number 687, "1 FOR THE MONEY; 2 FOR THE DOUGH; 3 TO GET WINNING; 4 IN A ROW," for which the Department of the Lottery will start selling tickets on a date to be determined by the Secretary of the Department. The rule sets forth the specifics of the game; determination of prizewinners; estimated odds of winning, value and number of prizes in the game.

THE PERSON TO BE CONTACTED REGARDING THE EMERGENCY RULE IS: Faith L. Schneider, Legal Analyst, Department of the Lottery, 250 Marriott Drive, Tallahassee, Florida 32399-4011

THE FULL TEXT OF THE EMERGENCY RULE IS:

53ER07-22 Instant Game Number 687, 1 FOR THE MONEY; 2 FOR THE DOUGH; 3 TO GET WINNING; 4 IN A ROW.

(1) Name of Game. Instant Game Number 687, "1 FOR THE MONEY; 2 FOR THE DOUGH; 3 TO GET WINNING; 4 IN A ROW."

(2) Price. 1 FOR THE MONEY; 2 FOR THE DOUGH; 3 TO GET WINNING; 4 IN A ROW lottery tickets sell for \$1.00 per ticket.