

**SUBJECT AREA TO BE ADDRESSED:** Standardized claims reporting requirements applicable to insurers after hurricanes or other natural disasters.

**RULEMAKING AUTHORITY:** 624.308, 627.7019 FS.

**LAW IMPLEMENTED:** 624.307(1), 624.319, 627.7019 FS.

**IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW:**

**DATE AND TIME:** May 26, 2009, 9:30 a.m.

**PLACE:** 116 Larson Building, 200 East Gaines Street, Tallahassee, Florida

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Dianne Williams-Cox, Director of Technology and Market Research, Office of Insurance Regulation, E-mail: Dianne.Williams-Cox@flor.com or (850)413-5004. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

**THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS:** Dianne Williams-Cox, Director of Technology and Market Research, Office of Insurance Regulation, E-mail: Dianne.Williams-Cox@flor.com or (850)413-5004

**THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS AVAILABLE AT NO CHARGE FROM THE CONTACT PERSON LISTED ABOVE.**

## Section II Proposed 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."

### **WATER MANAGEMENT DISTRICTS**

#### **Southwest Florida Water Management District**

<p><b>RULE NO.:</b> 40D-1.139</p>	<p><b>RULE TITLE:</b> Public Grievance Procedure: Americans With Disabilities Act and Discrimination in District Programs and Activities</p>
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**PURPOSE AND EFFECT:** To amend Rule 40D-1.139, F.A.C., to rename it and merge the requirements of the two incorporated public grievance procedures into one entitled, Public Grievance Procedure: Americans With Disabilities Act and Discrimination in District Programs and Activities.

**SUMMARY:** Currently the District has a procedure to satisfy the requirements for a public grievance process under the Americans with Disabilities Act (ADA) and another for the Rehabilitation Act of 1973. The new procedure will combine the two procedures, designate an ADA Compliance Coordinator and provide updated contact, address and email information to provide prompt and equitable resolution of grievances alleging that the District has violated any provision of the referenced federal regulations.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS:** No Statement of Estimated Regulatory Cost was prepared.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

**RULEMAKING AUTHORITY:** 373.044, 373.113 FS.

**LAW IMPLEMENTED:** 286.26, 373.083 FS., 28 C.F.R. §§35.106 and 35.107

**IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW.**

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Dianne Lee, Office of General Counsel, 2379 Broad Street, Brooksville, FL 34604-6899, (352)796-7211, extension 4657. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

**THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS:** Lori Tetreault, Senior Attorney, Office of General Counsel, 2379 Broad Street, Brooksville, FL 34604-6899, (352)796-7211, extension 4659

**THE FULL TEXT OF THE PROPOSED RULE IS:**

40D-1.139 Public Grievance Procedure: Americans With Disabilities Act and Discrimination in District Programs and Activities ~~Americans With Disabilities Act and Discrimination in Federally Funded Programs Public Grievance Procedures.~~

(1) The District designates the Human Resources Director as the Americans with Disabilities Act (ADA) Compliance Coordinator. ~~The Americans With Disabilities Act Public Grievance Procedure (July 1993) is hereby incorporated by~~

~~reference into this Chapter and is available from the District upon request from an ADA compliance coordinator or from the Human Resources Department.~~

~~(2) The Public Grievance Procedure: Americans With Disabilities Act and Discrimination in District Programs and Activities, which includes the address, telephone number and email address of the ADA Compliance Coordinator, is hereby incorporated by reference into this Chapter and is available from the District upon request to the Document Services Section, (352)796-7211, Extension 4053, or (800)423-1476, Extension 4053 (Florida only); or may be accessed online at [www.swfwmd.state.fl.us](http://www.swfwmd.state.fl.us). The District document entitled "Discrimination in Federally Funded Programs Public Grievance Procedure," (August 1993) is hereby incorporated by reference into this Chapter and is available from the District's Human Resources Department upon request.~~

~~(3) A District decision regarding a complaint made pursuant to the Public Grievance Procedure shall not be considered an agency action pursuant to Chapter 120 of the Florida Statutes.~~

~~Rulemaking Specific Authority 373.044, 373.113 FS. Law Implemented 286.26, 373.083 FS., 28 C.F.R. §§35.106 and 35.107. History--New 7-29-93, Amended 11-2-93, Formerly 40D-1.202, Amended \_\_\_\_\_.~~

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Lori Tetreault, Senior Attorney, Office of General Counsel,  
2379 Broad Street, Brooksville, FL 34604-6899,  
(352)796-7211, extension 4659

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Southwest Florida Water Management District Governing Board

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 31, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: April 24, 2009

**AGENCY FOR HEALTH CARE ADMINISTRATION**

**Medicaid**

RULE NO.: 59G-4.200  
RULE TITLE: Nursing Facility Services

PURPOSE AND EFFECT: The purpose of this rule amendment is to incorporate by reference the revised Florida Medicaid Nursing Facility Services Coverage and Limitations Handbook, May 2009, and delete the reference to the Florida Medicaid Provider Reimbursement Handbook, Institutional 021, which was obsolete July 1, 2008. The revised Nursing Facility Handbook includes updated Pre-Admission Screening and Resident Review (PASRR) requirements and forms, revised Medical Certification for Nursing Facility/Home and Community Based Services Form (previously named the Patient Transfer and Continuity of Care Form) and instructions, updated Medicare Part A crossover policy, and

revised policy for requesting supplemental payment for residents with AIDS. The revised handbook reiterates the nursing facility's requirement to enter the recipient's responsibility on the claim and eliminates the Medicaid Nursing Facility/ICF-DD Contribution Notices, AHCA Form 5000-3300.

The rule was revised to require nursing facility services providers to comply with the provisions of the Florida Medicaid Provider Reimbursement Handbook, UB-04, which replaced the Florida Medicaid Provider Reimbursement Handbook, Institutional 021. The authorization policies for supplemental payments for medically-fragile recipients under the age of 21 and recipients with AIDS and the Client Discharge/Change Notice, CF-ES 2506, that were in Chapter 2 of the Florida Medicaid Provider Reimbursement Handbook, Institutional 021, were moved to the revised Nursing Facility Handbook.

In the Notice of Rule Development we stated the effective date of the handbook was July 2008. We changed this date to May 2009.

The effect will be to incorporate by reference in rule the revised Florida Medicaid Nursing Facility Services Coverage and Limitations Handbook, May 2009; delete the reference to the Florida Medicaid Provider Reimbursement Handbook, Institutional 021; and require providers to comply with the provisions of the Florida Medicaid Provider Reimbursement Handbook, UB-04.

SUMMARY: The purpose of this rule amendment is to incorporate by reference into rule the Florida Medicaid Nursing Facility Services Coverage and Limitations Handbook, May 2009. The effect will be to incorporate by reference into rule the Florida Medicaid Nursing Facility Services Coverage and Limitations Handbook, May 2009.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The agency has determined that this rule amendment will not have an impact on small business. A SERC has not been prepared by the agency.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 409.919 FS.

LAW IMPLEMENTED: 409.902, 409.905, 409.908 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW (IF NOT REQUESTED, THIS HEARING WILL NOT BE HELD):

DATE AND TIME: Tuesday, June 2, 2009, 2:00 p.m.

PLACE: Agency for Health Care Administration, 2727 Mahan Drive, Building #3, Conference Room B, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Susan Rinaldi, Medicaid Services, 2727 Mahan Drive, Building 3, Mail Stop 20, Tallahassee, Florida 32308-5407, (850)487-3028, rinaldis@ahca.myflorida.com

THE FULL TEXT OF THE PROPOSED RULE IS:

59G-4.200 Nursing Facility Services.

(1) No change.

(2) All participating nursing facility providers must comply with the provisions of the Florida Medicaid Nursing Facility Services Coverage and Limitations Handbook, May 2009, October 2003, updated July 2004, erratum to the July 2004 update, which is incorporated by reference, and the corresponding Florida Medicaid Provider Reimbursement Handbook, UB-04, Institutional 021, October 2003, which is are incorporated by reference in Rule 59G-4.003, F.A.C. Both handbooks are available from the Medicaid fiscal agent's Web Portal at <http://mymedicaid-florida.com>. Click on Public Information for Providers, then on Provider Support, and then on Provider Handbooks. Paper copies of the handbook may be obtained by calling the Provider Contact Center at (800)289-7799 and selecting option 7.

(3) The following forms that are included in the Florida Medicaid Nursing Facility Services Coverage and Limitations Handbook are incorporated by reference:

(a) In Appendix A, AHCA Form 5210-001, May 2009 August 2000, Nurse Aide Training and Competency Evaluation Program Invoice, two pages, available from the Medicaid area offices.;

(b) In Appendix B, CF-ES 2506, Feb. 2003, Client Discharge/Change Notice, one page, and available from the Department of Children and Families district office CF-ES 2506A, May 2003, Client Referral/Notice, one page. Both forms are available from the Department of Children and Family Services Region or Circuit district offices or photocopying the forms in Appendix B.;

(c) In Appendix C, Medical Certification for Nursing Facility/Home and Community Based Services (MCNF/HCBS) Form AHCA-Med Serv 3008, May 2009, two pages, and Informed Consent Form, AHCA-Med Serv Form 2040, May 2008, in English and Spanish, one page, available from the Department of Elder Affairs website at [http://elderaffairs.state.fl.us/english/cares\\_3008ppp.php](http://elderaffairs.state.fl.us/english/cares_3008ppp.php).

(d) In Appendix D, Level I PASRR Screen and Determination Checklist, AHCA-Med Serv Form 004, Part A, May 2009, October 2003, three pages, and Request for Level II PASRR Evaluation and Determination, AHCA-Med Serv Form 004, Part B, May 2009, one page, available from the Department of Elder Affairs website at [http://elderaffairs.state.fl.us/english/cares\\_pasrr.php](http://elderaffairs.state.fl.us/english/cares_pasrr.php) or photocopying the forms in Appendix D, may be photocopied from the Florida Medicaid Nursing Facility Services Coverage and Limitations

Handbook; and AHCA Form 5000-3300, April 02, Medicaid Nursing Facility/ICF-DD Contribution Notice available or from the Medicaid area offices.

(e) In Appendix G, AIDS Supplemental Payment Authorization Form, AHCA-Med Serv Form 049, May 2009, two pages, available by photocopying from the handbook.

Rulemaking Specific Authority 409.919 FS. Law Implemented Chapter 400 Part II, 409.902, 409.905, 409.908 FS. History--New 1-1-77, Amended 6-13-77, 10-1-77, 1-1-78, 2-1-78, 12-28-78, 2-14-80, 4-5-83, 1-1-84, 8-29-84, 9-1-84, 9-5-84, 7-1-85, Formerly 10C-7.48, Amended 8-19-86, 6-1-89, 7-2-90, 6-4-92, 8-5-92, 11-2-92, 7-20-93, Formerly 10C-7.048, Amended 11-28-95, 5-9-99, 10-15-00, 10-4-01, 2-10-04, 9-28-04, 8-31-05, 7-23-06,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Susan Rinaldi

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Holly Benson, Secretary

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 27, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 16, 2008

#### AGENCY FOR HEALTH CARE ADMINISTRATION

##### Medicaid

RULE NO.:

59G-4.251

RULE TITLE:

Florida Medicaid Prescribed Drugs Reimbursement Methodology

PURPOSE AND EFFECT: The purpose of this rule is to state the reimbursement methodology for prescribed drug claims in the Florida Medicaid program.

SUMMARY: The purpose of this rule is to state the reimbursement methodology for prescribed drug claims in the Florida Medicaid program, per statutory change.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: Approximately 3,300 retail pharmacy providers of Medicaid prescription services are affected by this rule, and no individual Medicaid recipients are affected. Implementation of this rule will reduce the dispensing fee paid to all retail providers of Florida Medicaid prescription services from \$4.23 to \$3.73 per prescription. The total reduction in fees paid will be approximately \$6.39 million annually. No transactional costs will be incurred pertaining to requirements of this rule. Some of these retail pharmacies may qualify as small businesses as defined by Section 288.703, F.S., however the number is not known. The dispensing fee change is the same for all Medicaid retail pharmacy providers.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 409.919 FS.

LAW IMPLEMENTED: 409.906(20), 409.908(14), 409.912(39)(a) FS.

A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW:

DATE AND TIME: June 3, 2009, 10:00 a.m.

PLACE: Agency for Health Care Administration, 2727 Mahan Drive, Building 3, Conference Room D, Tallahassee, FL 32308  
THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Marie Donnelly, (850)487-4441

THE FULL TEXT OF THE PROPOSED RULE IS:

59G-4.251 Florida Medicaid Prescribed Drugs Reimbursement Methodology.

(1) Reimbursement for prescribed drug claims is made in accordance with the provisions of Title 42, Code of Federal Regulations Sections 447.512-.516. Reimbursement for covered drugs dispensed by a licensed pharmacy, approved as a Medicaid provider, or an enrolled dispensing physician filling his own prescriptions, shall not exceed the lower of:

(a) The estimated acquisition cost, defined as the lower of:

1. Average Wholesale Price (AWP) minus 16.4%, or Wholesaler Acquisition Cost (WAC) plus 4.75%, plus a dispensing fee of ~~\$3.73~~ ~~\$4.23~~;

2. The Federal Upper Limit (FUL) established by the Centers for Medicare and Medicaid Services, plus a dispensing fee of ~~\$3.73~~ ~~\$4.23~~; or

(b) The State Maximum Allowable Cost (SMAC), plus a dispensing fee of ~~\$3.73~~ ~~\$4.23~~; or

(c) The provider's Usual and Customary (U&C) charge, inclusive of dispensing fee.

(2) For drugs purchased by qualified entities under Section 340B of the Public Health Service Act: Covered entities and Federally Qualified Health Centers or their contracted agents that fill Medicaid patient prescriptions with drugs purchased at prices authorized under Section 340B of the Public Health Service Act must bill Medicaid for reimbursement at the actual acquisition cost plus a dispensing fee of \$7.50 for these drugs.

Rulemaking Specific Authority 409.919 FS. Law Implemented 409.906(20), 409.908, 409.912(39)(a) FS. History—New 1-28-09, Amended.

NAME OF PERSON ORIGINATING PROPOSED RULE: Marie Donnelly

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Holly Benson

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 29, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 13, 2009

**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 JUVENILE JUSTICE**

**Residential Services**

RULE NO.: 63E-7.002  
RULE TITLE: Definitions

PURPOSE AND EFFECT: Deleting language that retained an exclusion for specialized programs, which would conflict with a January 2009 amendment.

SUMMARY: In January 2009, the rule chapter was amended to incorporate specialized programs such as serious habitual offender and intensive residential treatment programs. Specific language excluding these programs from the scope of the rule chapter was deleted at that time. However, language in a single definition, which repeated the exclusion, was inadvertently retained, and must now be deleted.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 985.64 FS.

LAW IMPLEMENTED: 985.601(3)(a) FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW:

DATE AND TIME: Monday, June 1, 2009, 10:00 a.m.

PLACE: DJJ Headquarters, 2737 Centerview Drive, General Counsel's Conference Room 3223, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: John Milla, 2737 Centerview Dr., Ste. 3200, Tallahassee, FL 32399-3100; e-mail: [john.milla@djj.state.fl.us](mailto:john.milla@djj.state.fl.us)

THE FULL TEXT OF THE PROPOSED RULE IS:

63E-7.002 Definitions.

(1) through (72) No change.

(73) Residential Commitment Program – a low-risk, moderate-risk, high-risk, or maximum risk residential delinquency program for committed youth. ~~Although serious habitual offender programs, intensive residential treatment programs, sex offender programs, sheriff's training and respect programs, and expedition programs are considered residential commitment programs, for purposes of this chapter, they are excluded.~~

(74) through (87) No change.

Rulemaking Specific Authority 985.64, 985.601(3)(a), 20.316 FS. Law Implemented 985.601(3)(a), 985.03(44), 985.441(1)(b) FS. History–New 9-30-07, Amended 8-25-08,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Darryl Olson, Assistant Secretary for Residential Services  
 NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Frank Peterman, Jr., Secretary  
 DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 27, 2009  
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: April 10, 2009

**DEPARTMENT OF HEALTH**

**Board of Optometry**

RULE NO.: 64B13-18.002  
 RULE TITLE: Formulary of Topical Ocular Pharmaceutical Agents

PURPOSE AND EFFECT: The purpose of the amendment is to correct the maximum permitted concentration of olopatadine.

SUMMARY: The proposed rule will increase the amount of olopatadine in topical ocular pharmaceutical agents.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board has determined that the proposed rule amendments will not have an impact on small business.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 463.005, 463.0055(2)(a) FS. LAW IMPLEMENTED: 463.0055 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Joe Baker, Jr., Executive Director, Board of Optometry, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B13-18.002 Formulary of Topical Ocular Pharmaceutical Agents.

The topical ocular pharmaceutical formulary consists of pharmaceutical agents which a certified optometrist is qualified to administer and prescribe in the practice of optometry pursuant to Section 463.0055(2)(a), F.S. The topical ocular pharmaceutical agents in the formulary include the

following legend drugs alone or in combination in concentrations up to those specified, or any lesser concentration that is commercially available:

(1) through (5) No change.

(6) ANTIHISTAMINES, MAST CELL STABILIZERS AND ANTI-ALLERGY AGENTS

(a) through (b) No change.

(c) Olopatadine HCl – 0.2% ~~0.1%~~;

(d) through (g) No change.

(7) through (9) No change.

Rulemaking Specific Authority 463.005, 463.0055(2)(a) FS. Law Implemented 463.0055 FS. History–New 3-30-87, Amended 4-5-88, 5-7-90, Formerly 21-18.002, Amended 5-10-92, 1-29-93, Formerly 21Q-18.002, Amended 8-31-93, 7-30-94, Formerly 61F8-18.002, Amended 2-11-96, 4-21-96, 1-12-97, 6-8-97, Formerly 59V-18.002, Amended 6-15-00, 6-7-05, 6-10-06, 6-26-08, 10-16-08, 3-23-09,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Optometry

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Optometry

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: March 27, 2009

**DEPARTMENT OF HEALTH**

**Board of Osteopathic Medicine**

RULE NO.: 64B15-12.005  
 RULE TITLE: Limited Licensure

PURPOSE AND EFFECT: The Board proposes the rule amendment to incorporate the licensure application.

SUMMARY: The application form will be incorporated into the rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined the proposed rule will not have an impact on small business.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 459.005, 459.0075 FS. LAW IMPLEMENTED: 456.0075 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kaye Howerton, Executive Director, Board of Osteopathic Medicine, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3253

THE FULL TEXT OF THE PROPOSED RULE IS:

64B15-12.005 Limited Licensure.

(1) Each applicant for limited licensure pursuant to Section 459.0075, F.S., shall file board approved application form, DH-MQA 1171 (Rev 2/09), Application for Limited License, which is hereby incorporated by reference, and may be obtained from the Board of Osteopathic Medicine, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256 ~~an application~~ and submit an affidavit to the Board. For purposes of this rule, retired means previously separated or withdrawn from the practice of Osteopathic Medicine, as distinguished from a relocation of the applicant's practice to a different geographic area.

(2) through (4) No change.

Rulemaking Specific Authority 459.005, 459.0075 FS. Law Implemented 459.0075 FS. History–New 10-28-93, Formerly 61F9-12.005, Amended 10-15-95, Formerly 59W-12.005, Amended 11-27-97,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:

Board of Osteopathic Medicine

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE:

Board of Osteopathic Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD:

February 7, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW:

March 13, 2009

**DEPARTMENT OF HEALTH**

**Board of Osteopathic Medicine**

RULE NO.: RULE TITLE:

64B15-12.009 Osteopathic Faculty Certificate

PURPOSE AND EFFECT: The Board proposes the rule amendment to incorporate the Osteopathic Faculty Certificate application.

SUMMARY: The Osteopathic Faculty Certificate application will be incorporated into the rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined the proposed rule will not have an impact on small business.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

RULEMAKING AUTHORITY: 459.005, 459.0077 FS.

LAW IMPLEMENTED: 456.0077 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kaye Howerton, Executive Director, Board of Osteopathic Medicine, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3253

THE FULL TEXT OF THE PROPOSED RULE IS:

64B15-12.009 Osteopathic Faculty Certificate.

(1) An Osteopathic Faculty Certificate may be issued by the Department to a faculty member of a school accredited by the American Osteopathic Association upon the request of the dean of the school if the faculty member has demonstrated to the Board that:

(a) The faculty member is currently licensed to practice osteopathic medicine in another jurisdiction of the United States; and

(b) Is a graduate of a school of osteopathic medicine accredited by the American Osteopathic Association; and

(c) Files an application on board approved application form, DH-MQA 1193 (Rev. 2/09), Application for Osteopathic Medical Faculty Certificate, which is hereby incorporated by reference, and may be obtained from the Board of Osteopathic Medicine, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256 and otherwise meets the requirements contained in Section 459.0055, F.S.; and

(d) Has submitted the application fee required by subsection 64B15-10.002(6), F.A.C.

(2) through (3) No change.

Rulemaking Specific Authority 459.005, 459.0077 FS. Law Implemented 459.0077 FS. History–New 2-26-02, Amended \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:

Board of Osteopathic Medicine

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE:

Board of Osteopathic Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD:

February 7, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW:

March 13, 2009

**DEPARTMENT OF HEALTH**

**Board of Osteopathic Medicine**

RULE NO.: RULE TITLE:

64B15-22.004 Mandatory Registration of Unlicensed Physicians

PURPOSE AND EFFECT: The Board proposes the rule amendment to incorporate the application form for registration as a resident, intern or fellow.

SUMMARY: The application form will be incorporated into the rule.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS:** No Statement of Estimated Regulatory Cost was prepared. The Board determined the proposed rule will not have an impact on small business.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

**RULEMAKING AUTHORITY:** 459.005, 459.021 FS.

**LAW IMPLEMENTED:** 459.021 FS.

**IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW.**

**THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS:** Kaye Howerton, Executive Director, Board of Osteopathic Medicine, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3253

**THE FULL TEXT OF THE PROPOSED RULE IS:**

64B15-22.004 Mandatory Registration of Unlicensed Physicians.

Registration as a resident, intern, or fellow shall be accomplished by completing the board approved application form, DH-MQA 1172 (Rev 2/09), Application for Registration as an Osteopathic Physician in Training, which is hereby incorporated by reference, and may be obtained from the Board of Osteopathic Medicine, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256 ~~an application form supplied by the Department.~~ Said application shall include the following information:

- (1) through (5) No change.

Rulemaking Specific Authority 459.005, 459.021 FS. Law Implemented 459.021 FS. History—New 10-28-91, Amended 1-3-93, Formerly 21R-22.004, 61F9-22.004, 59W-22.004, Amended 1-19-98, \_\_\_\_\_.

**NAME OF PERSON ORIGINATING PROPOSED RULE:** Board of Osteopathic Medicine

**NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE:** Board of Osteopathic Medicine

**DATE PROPOSED RULE APPROVED BY AGENCY HEAD:** February 7, 2009

**DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW:** March 13, 2009

**DEPARTMENT OF FINANCIAL SERVICES**

**Division of Workers' Compensation**

<p><b>RULE NO.:</b> 69L-6.025</p>	<p><b>RULE TITLE:</b> Conditional Release of Stop Work Order and Periodic Payment Agreement</p>
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**PURPOSE AND EFFECT:** The proposed rule amendment clarifies guidelines and procedures by which employers subject to stop-work orders for having failed to comply with the coverage requirements of Chapter 440, F.S., and are no longer failing to secure the payment the of compensation within the meaning of Section 440.107, F.S., may satisfy the Department that they have come into compliance with Chapter 440, F.S. The amendment provides new language that outlines the terms and conditions under which an employer qualifies to enter into a new Payment Agreement Schedule For Periodic Payment of Penalty. The amendment deletes the requirement that subject employers file probationary periodic reports with the Department and amends Form DFS-F4-1601 (Monthly Payment Installment Invoice) to reflect this change. The proposed amendment also renumbers the rule to reflect the new language. The effect of the proposed rule amendment is to extend the payment agreement over a greater time horizon to those employers having demonstrated ongoing compliance with the terms and conditions of the Department's periodic payment agreement and to streamline the rule's administration.

**SUMMARY:** The proposed rule amendment provides new language clarifying procedures regarding the conditional release of stop-work orders and the reinstatement of stop-work orders where employers have defaulted on penalty payment obligations. The proposed amendment also deletes the requirement that subject employers file probationary periodic reports with the Department and amends Form DFS-F4-1601 (Monthly Payment Installment Notice) to reflect this change.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS:** No Statement of Estimated Regulatory Cost was prepared.

Any person who wishes to provide information regarding a statement of estimated regulatory costs, or provide a proposal for a lower cost regulatory alternative must do so in writing within 21 days of this notice.

**RULEMAKING AUTHORITY:** 440.107(9), 440.591 FS.

**LAW IMPLEMENTED:** 440.107(7) FS.

**IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW (IF NOT REQUESTED, THIS HEARING WILL NOT BE HELD):**

**DATE AND TIME:** May 29, 2009, 10:00 a.m.

**PLACE:** 104 J Hartman Bldg., 2012 Capital Circle S.E., Tallahassee, FL

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Tasha Carter, (850)413-1878. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Tasha Carter, Bureau Chief, Bureau of Compliance, Division of Workers' Compensation, Department of Financial Services, 200 East Gaines Street, Tallahassee, Florida 32399-4228, phone (850)413-1878

THE FULL TEXT OF THE PROPOSED RULE IS:

69L-6.025 Conditional Release of Stop-Work Order and Periodic Payment Agreement.

(1) No change.

(a) through (b) No change.

~~(c) The employer agrees to file probationary periodic reports with the Department for a time period that does not exceed 2 years that demonstrate the employer's continued compliance with Chapter 440, F.S. The probationary periodic reports shall be filed as a section of each monthly payment installment invoice pursuant to the Payment Agreement Schedule for Periodic Payment of Penalty.~~

(2) No change.

(a) through (g) No change.

(3) The Payment Agreement Schedule For Periodic Payment of Penalty becomes effective when it is executed on behalf of the employer and by the Department. Upon execution of the Payment Agreement Schedule For Periodic Payment of Penalty, the Department will provide the employer with a Monthly Payment Installment Invoice, Form Number DFS-F4-1601 (eff. \_\_\_\_\_) (~~rev. 8/04~~), which shall be submitted with each monthly payment installment. ~~Each Monthly Payment Installment Invoice contains a probationary reporting section that shall be completed by the employer.~~

(4) No change.

(5) An employer that has entered into a Payment Agreement Schedule For Periodic Payment of Penalty with the Department currently in default of any of its obligations under such agreement or that has had its stop-work order immediately reinstated through an Order Reinstating Stop-Work Order is ineligible for conditional release from a stop-work order issued to it by the Department in a subsequent separate case.

(6) An employer that has been conditionally released from a stop-work order and is not in default of its current Payment Agreement Schedule For Periodic Payment of Penalty is ineligible for conditional release from a stop-work order issued to it by the Department in a subsequent case.

(7) At the request of an employer, the Department and an employer may enter into a new Payment Agreement Schedule For Periodic Payment of Penalty, thereby extending the payment of the outstanding penalty amount for up to sixty consecutive monthly installments, if the following criteria have been met, as determined by the Department:

(a) The employer must not be in default of its original Payment Agreement Schedule For Periodic Payment of Penalty;

(b) The employer must have submitted at least six (6) monthly payments under its original Payment Agreement Schedule For Periodic Payment of Penalty;

(c) If the employer was issued an Order Reinstating Stop-Work Order that was later rescinded, the employer must have submitted at least six monthly payments under its original Payment Agreement Schedule For Periodic Payment of Penalty after the issue date of the Order Rescinding Order Reinstating Stop-Work Order; and

(d) If a payment made by the employer was returned to the Department by the employer's financial institution for non-sufficient funds, the employer must have submitted at least six monthly payments under its original Payment Agreement Schedule For Periodic Payment of Penalty after the returned payment has been cured.

(8) The Department will enter into only one new Payment Agreement Schedule For Periodic Payment of Penalty with an employer. The Department shall not enter into a new Payment Agreement Schedule For Periodic Payment of Penalty with any employer that has had its Stop-Work Order reinstated, nor to any employer that has had its case forwarded to a collection agency for collection of the remaining penalty.

~~(9)~~(6) The Department hereby adopts and incorporates the following forms by reference. Copies of the forms can be obtained from the Division of Workers' Compensation's Bureau of Compliance, 200 East Gaines Street, Tallahassee, Florida 32399-4228, or from any field office identified in Rule 69L-6.009, F.A.C.

(a) No change.

(b) DFS-F4-1601 Monthly Payment Installment Invoice eff. \_\_\_\_\_ ~~rev. 8/04~~.

(c) No change.

~~(10)~~(7) Employers assessed penalties pursuant to Rule 69L-6.030, F.A.C., are eligible to enter into a Payment Agreement Schedule for Periodic Payment of Penalty with the Department.

~~(11)~~(8) If an employer conducts business operations in violation of an Order Reinstating Stop-Work Order, a penalty shall be assessed against the employer pursuant to Section 440.107(7)(c), F.S. The number of days that the employer conducts business operations in violation of an Order Reinstating Stop-Work Order shall begin on the date the Order Reinstating Stop-Work Order is immediately reinstated.

(12) An employer found conducting business in violation of an Order Reinstating Stop-Work Order may not enter into another Payment Agreement Schedule For Periodic Payment of Penalty for a penalty assessed as a result of conducting business in violation of the Order Reinstating Stop-Work Order. In order to obtain a release of the Order Reinstating



Stop-Work Order, the employer must pay all penalties assessed and must provide proof of compliance with the coverage requirements of Chapter 440, F.S.

Rulemaking Specific Authority 440.107(9), 440.591 FS. Law Implemented 440.107(7) FS. History–New 4-6-05, Amended 7-20-05, 2-6-07,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Tasha Carter, Bureau Chief, Bureau of Compliance, Division of Workers' Compensation

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Alex Sink, Chief Financial Officer, Department of Financial Services

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 10, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: March 27, 2009

### Section III Notices of Changes, Corrections and Withdrawals

**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 MANAGEMENT SERVICES**

**Division of Retirement – Local Retirement**

RULE NO.:	RULE TITLE:
60T-1.005	Review of Actuarial Reports and Actuarial Impact Statements

**NOTICE OF CORRECTION**

Notice is hereby given that the following correction has been made to the proposed rule in Vol. 35, No. 16, April 24, 2009 issue of the Florida Administrative Weekly.

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Linda H. South, Secretary

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 14, 2009

**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 CHILDREN AND FAMILY SERVICES**

**Economic Self-Sufficiency Program**

RULE NOS.:	RULE TITLE:
65A-1.900	Overpayment and Benefit Recovery

**NOTICE OF PUBLIC HEARING**

The Department of Children and Family Services announces an additional hearing regarding the above rule, as noticed in Vol. 35, No. 13, April 3, 2009, Florida Administrative Weekly.

DATE AND TIME: May 18, 2009, 1:30 p.m.

PLACE: 1317 Winwood Boulevard, Building 3, Room 455, Tallahassee, Florida 32399-0700

GENERAL SUBJECT MATTER TO BE CONSIDERED: Continuation of hearing held 4/28/2009.

**DEPARTMENT OF FINANCIAL SERVICES**

**Division of State Fire Marshal**

RULE NOS.:	RULE TITLES:
69A-53.0052	Fire Sprinkler Requirements for Nursing Homes
69A-53.0053	State Fire Marshal Nursing Home Fire Protection Loan Guarantee Program: Application Procedures

**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. 35, No. 12, March 27, 2009 issue of the Florida Administrative Weekly.

Loan Guarantee Program: Application Procedures.

69A-53.0052 Fire Sprinkler Requirements for Nursing Homes.

- (1) No change.
- (2) The Division ~~may~~ shall grant a maximum of two one-year extensions to the final date of compliance only after establishing that the nursing home has been prevented from complying for reasons beyond its control. Such reasons may include:

- (a) through (c) No change.

- (3) No change.

69A-53.0053 State Fire Marshal Nursing Home Fire Protection Loan Guarantee Program: Application Procedures.

No change.

**FINANCIAL SERVICES COMMISSION**

**OIR – Insurance Regulation**

RULE NO.:	RULE TITLE:
69O-138.005	Examination of Insurers