

Barineau, Executive Director, Building Code Administrators and Inspectors Board, 1940 North Monroe Street, Tallahassee, Florida 32399-0750

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

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 FINANCIAL SERVICES

Division of State Fire Marshal

RULE NO.: 69A-21.113
RULE TITLE: Required Continuing Education
PURPOSE AND EFFECT: The legislature changed the continuing education requirements for licensed fire equipment dealers from 32 hours every four years upon renewal, to 16 hours every two years, and made the renewal period December 31 of each year instead of the anniversary date of initial licensure.

SUBJECT AREA TO BE ADDRESSED: All fire equipment licenseholders and permitholders, regardless of any previous continuing education due date, must provide proof of sixteen hours of continuing education for renewal on December 31, 2011 and every two-year period thereafter.

RULEMAKING AUTHORITY: 633.01, 633.061(4) FS.
LAW IMPLEMENTED: 633.061 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:

TIME AND DATE: Wednesday, January 19, 2011, 2:00 p.m.
PLACE: Ocean Center, 101 North Atlantic Avenue, Room 102A, Daytona Beach, Florida 32118

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: Casia Sinco, Casia.Sinco@myfloridacfo.com, (850)413-3644. 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: Casia Sinco, Casia.Sinco@myfloridacfo.com, (850)413-3644

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS NOT AVAILABLE.

DEPARTMENT OF FINANCIAL SERVICES

OIR – Insurance Regulation

RULE NO.: 69O-137.004
RULE TITLE: Reports of Information by Health Insurers Required

PURPOSE AND EFFECT: To update and revise the Gross Annual Premium (GAP) report (OIR-B2-1094). The workshop will have a demonstration of the new reporting requirements as well as an opportunity to make suggested improvements in the form.

SUBJECT AREA TO BE ADDRESSED: Health Insurer Reporting.

RULEMAKING AUTHORITY: 624.308(1), 627.9175 FS.

LAW IMPLEMENTED: 624.307(1), 627.9175 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

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

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

**Section II
Proposed Rules**

DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

Division of Forestry

RULE NOS.: 5I-4.002, 5I-4.005, 5I-4.006, 5I-4.008
RULE TITLES: Purpose and Definitions, Protection of Managed Lands, Recreational Activities and Facilities Vendors; Authorizations; Fees

PURPOSE AND EFFECT: Modify the definition off-highway vehicle, and add two new definitions, modify two locations as the result of re-numbering for the new definitions, and add a new off-highway trail system as new recreational activity and facilities.

SUMMARY: This rulemaking adopts the revised definition of off-highway vehicles, adds two new definitions, modify two locations as a result of the new definitions, and adds a new location where off-highway vehicles can be operated on for Division of Forestry managed lands.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The agency has determined that this rule 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: 570.07(23), 589.011(4), 589.071, 589.12 FS.

LAW IMPLEMENTED: 589.011(3), 589.071 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 RULES IS: Steve Bohl, 3125 Conner Blvd., Tallahassee, FL 32399-1650, (850)414-9914

THE FULL TEXT OF THE PROPOSED RULES IS:

5I-4.002 Purpose and Definitions.

The purpose of this chapter is to provide information regarding the utilization of lands and facilities managed or controlled by the Department of Agriculture and Consumer Services, Division of Forestry. The following words have the meaning indicated:

(1) through (20) No change.

(21) OFF-HIGHWAY VEHICLE – Any ATV, two rider ATV, ROV, or OHM that is used off the roads or highways of this state and is not registered and licensed for highway use under Chapter 320, F.S.

(22) through (25) No change.

(26) Recreational Off-highway Vehicle (ROV). Any motorized recreational off-highway vehicle 64 inches or less in width, having a dry weight of 2,000 pounds or less, designed to travel on four or more nonhighway tires, having nonstraddle seating and a steering wheel, and manufactured for recreational use by one or more persons. The term “ROV” does not include a golf cart as defined in Sections 320.01(22) and 316.003(68), F.S., or a low-speed vehicle as defined in Section 320.01(42), F.S.

(27)(26) RECREATIONAL VEHICLE: A motor vehicle designed to provide temporary living quarters for recreational, camping, or travel use, which has its own propulsion or is mounted on or towed by another motor vehicle.

(28)(27) SCHEDULE OF FEES: The Division is authorized under Section 589.011(3), F.S., to set and charge fees for the use or operation of facilities on state forest or any lands leased to the Division for management purposes. A list of the current fees can be found in the document entitled “User Fees on Florida Division of Forestry Managed Lands, September 2010” which is hereby adopted and incorporated by reference. This fee schedule can be obtained by contacting any

State Forest office, the Florida Division of Forestry, Bureau of Forest Management, 3125 Conner Blvd., Tallahassee, FL 32399-1650, or by visiting http://www.fl-dof.com/forest_recreation/fees.html.

(29)(28) SWIMMING AREA: Any area designated for swimming.

(30) Two-rider ATV. Any ATV that is specifically designed by the manufacturer for a single operator and one passenger.

(31)(29) WATERCRAFT: Any motorized, paddle-propelled or wind-driven means of water-related transportation.

(32)(30) YOUTH GROUP: Any organized group of seven or more youths (under the age of 18) who are affiliated with a recognized not-for-profit organization, accompanied by one or more adult (18 years or older) chaperon(s).

Rulemaking Specific Authority 570.07(23), 589.011(4), 589.071, 589.12 FS. Law Implemented 589.011(3), 589.071 FS. History–New 5-24-92, Amended 1-19-95, 11-6-95, 5-31-04, 3-2-09,_____.

5I-4.005 Protection of Managed Lands.

No person shall:

(1) through (15) No change.

(16) Operate a commercial enterprise on managed lands, except in limited circumstances where such enterprise provides a compatible service to forest visitors participating in recreation, and only after notification to the Division, and payment of the applicable fee in accordance with subsection 5I-4.002 (28)(27), F.A.C.

(17) through (20) No change.

Rulemaking Specific Authority 570.07(23), 589.011(4), 589.071, 589.12 FS. Law Implemented 589.011(3), 589.071 FS. History–New 5-24-92, Amended 1-19-95, 5-15-95, 11-6-95, 5-31-04,_____.

5I-4.006 Recreational Activities and Facilities.

(1) through (5) No change.

(6) Croom Motorcycle Area at Withlacoochee State Froest and Off-Highway Vehicle Trail System at Tates Hell State Forest:

(a) Firearms are prohibited within the boundaries of the Croom Motorcycle Area.

(b) No person shall operate an off-highway vehicle inside the boundaries of the Croom Motorcycle Area or at the Off-Highway Vehicle Trail System unless the vehicle visibly displays a valid, permanently attached, motorcycle decal issued by the Division.

(c) No person shall operate an off-highway vehicle within the Croom Motorcycle Area or on the Off-Highway Vehicle Trail System between sunset and sunrise.

(d) All persons operating off-highway vehicles on managed lands do so at their own risk and must comply with all established rules.

(e) No person shall operate an off-highway vehicle within the Croom Motorcycle Area or on the Off-Highway Vehicle Trail System unless such vehicle has a muffler system conforming to the requirements of the Florida Highway Patrol Handbook.

(f) No person shall operate a motorized cycle faster than ten (10) miles per hour inside the Croom Motorcycle Area or inside Off-Highway Vehicle Trail System camping facilities(†) and day-use parking areas.

(g) No person under the age of 16 shall operate or ride a motorized cycle in the Croom Motorcycle Area or on the Off-Highway Vehicle Trail System without the direct supervision of an adult (18 years or older).

(h) Horses are prohibited in the Croom Motorcycle Area.

(7) through No change.

Rulemaking Specific Authority 570.07(23), 589.011(4), 589.071, 589.12 FS. Law Implemented 589.011(3), 589.071 FS. History—New 5-24-92, Amended 1-19-95, 11-6-95, 5-31-04, 3-2-09, _____.

5I-4.008 Vendors; Authorizations; Fees.

Any offsite commercial enterprise desiring to provide horses, canoes, bicycles, or other animals or equipment to any person for use on managed lands shall pay any applicable fees in accordance with subsection 5I-4.002(28)(27), F.A.C., to the Division. The commercial enterprise shall provide all customers with copies of Division brochures containing general information governing use of the forest.

Rulemaking Specific Authority 570.07(23), 589.011(4), 589.071, 589.12 FS. Law Implemented 589.011(3), 589.071 FS. History—New 5-24-92, Amended 11-6-95, 5-31-04, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
James R. Karels, Director, Division of Forestry

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Charles H. Bronson, Commissioner of Agriculture

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: November 21, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: December 10, 2010

DEPARTMENT OF EDUCATION

Florida School for the Deaf and the Blind

RULE NO.: 6D-6.003
RULE TITLE: Use of School Facilities and Equipment

PURPOSE AND EFFECT: In accordance with Florida Statute 1002.36, the Florida School for the Deaf and the Blind is recognized as a state agency, therefore is required to comply with all state and federal laws required of public state agencies. Consequently, this rule is not needed.

SUMMARY: This rule establishes criteria for the use of school facilities and equipment by outside organizations.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: There is no financial impact.

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: 1002.36(4)(c) FS.

LAW IMPLEMENTED: 1002.36(4)(e) 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: Friday, January 28, 2011, 9:00 a.m.

PLACE: Center for Leadership Development, Moore Hall, Florida School for the Deaf and the Blind, 207 N. San Marco Avenue, St. Augustine, FL 32084

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Cindy Day, (904)827-2221

THE FULL TEXT OF THE PROPOSED RULE IS:

6D-6.003 Use of School Facilities and Equipment.

Rulemaking Specific Authority 1002.36(4)(c) FS. Law Implemented 1002.36(4)(e) FS. History—New 12-19-74, Amended 4-17-85, 9-8-85, Formerly 6D-6.03, Amended 8-26-86, 2-19-91, 11-1-95, 2-26-01, Repealed _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Terri Wiseman

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Danny Hutto

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 15, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 23, 2010

DEPARTMENT OF EDUCATION

Florida School for the Deaf and the Blind

RULE NO.: 6D-8.004
RULE TITLE: Food Service Policies

PURPOSE AND EFFECT: In accordance with Florida Statute 1002.36, the Florida School for the Deaf and the Blind is recognized as a state agency, therefore is required to comply with all state and federal laws required of public state agencies. Consequently, this rule is not needed.

SUMMARY: This rule establishes written policies and procedures for the Food Services program.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: There is no financial impact.

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: 1002.36(4)(c) FS.
 LAW IMPLEMENTED: 1002.36(4)(e) 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: Friday, January 28, 2011, 9:00 a.m.
 PLACE: Florida School for the Deaf and the Blind, Center for Leadership Development, Moore Hall, 207 N. San Marco Avenue, St. Augustine, FL 32084
 THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Cindy Day, (904)827-2221

THE FULL TEXT OF THE PROPOSED RULE IS:

6D-8.004 Food Service Policies.

Rulemaking Specific Authority 1002.36(4)(c) FS. Law Implemented 1002.36(4)(e) FS. History—New 1-17-91, Amended 5-14-02, Repealed _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Terri Wiseman
 NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Danny Hutto
 DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 15, 2010
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 23, 2010

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."

STATE BOARD OF ADMINISTRATION

| | |
|-------------------|--------------------------------|
| RULE NOS.: | RULE TITLES: |
| 19-8.029 | Insurer Reporting Requirements |
| 19-8.030 | Insurer Responsibilities |

PURPOSE AND EFFECT: The State Board of Administration, Florida Hurricane Catastrophe Fund, seeks to amend the rules listed above to implement Section 215.555, F.S.
 SUMMARY: The rules are being amended to adopt 2011/2012 Contract Year forms. Substantive changes are as follows: Rule 19-8.029, F.A.C., Insurer Reporting Requirements, is being amended to adopt the 2011/2012 Data Call and the 2011/2012 Interim and Proof of Loss forms. Rule 19-8.030, F.A.C., Insurer Responsibilities, is being amended to adopt the 2011/2012 Exposure and Loss Examination Advance Preparation Instructions and to adopt the 2011/2012 Interim and Proof of Loss forms.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: A SERC has been prepared by the agency for Rule 19-8.029, F.A.C., and is available by contacting Tracy Allen at the address, telephone number or e-mail address listed below. A SERC has not been prepared for Rule 19-8.030, F.A.C. The following is a summary of the SERC: No adverse impact on economic growth, private-sector job creating or employment, or private sector investment. No adverse impact on business competitiveness or innovation. Minimal regulatory costs for the 172 participating insurers to make minor one-time programming changes. No increased spending for the Agency anticipated. No costs to other states, local governmental entities, small counties or small cities. No impact on state or local revenues.

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: 215.555(3) FS.
 LAW IMPLEMENTED: 215.555(2), (3), (4), (5), (6), (7), (10), (16), (17) FS.

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

DATE AND TIME: Tuesday, January 25, 2011, 9:00 a.m. – 12:00 Noon (ET)

PLACE: Room 116 (Hermitage Conference Room), 1801 Hermitage Blvd., Tallahassee, FL 32308; Persons who wish to participate by telephone may call 1(888)808-6959 and use conference code 4765251363 on the date and at the time indicated for the hearing.

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 7 days before the workshop/meeting by contacting: Tracy Allen, P. O. Box 13300, Tallahassee, FL 32317-3300, (850)413-1341 or tracy.allen@sbafla.com. 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 RULES IS: Tracy Allen, P. O. Box 13300, Tallahassee, FL 32317-3300, (850)413-1341 or tracy.allen@sbafla.com

THE FULL TEXT OF THE PROPOSED RULES IS:

- 19-8.029 Insurer Reporting Requirements.
- (1) through (2) No change.
- (a) Citizens Property Insurance Corporation or "Citizens" means the entity formed under Section 627.351(6), F.S., and includes both the High Risk Account and the Personal Lines and Commercial Lines Accounts.
- (b) through (d) No change.

(e) Data Call means the annual reporting of insured values forms. These forms are the FHCF-D1A for Contract Years after the 2002/2003 Contract Year year and the FHCF-D1A and FHCF-D1B for the Contract Year 2002/2003 and all prior Contract Years years.

(f) through (2)(g) No change.

(h) Loss Reporting Forms mean the FHCF-L1A and FHCF-L1B for Contract Years after the 2002/2003 Contract Year and means the FHCF-L1A, FHCF-L1B and FHCF-L1C for the Contract Years 2002/2003 and all prior Contract Years years.

(i) through (3)(a) No change.

(b) Confidentiality of reports containing insured values under Covered Policies. Section 215.557, F.S., enacted for the express purpose of protecting trade secret and proprietary information submitted to the FHCF by participating insurers, protects the confidentiality of information of the type submitted in the Data Call (FHCF-D1A), examination workpapers, and examination reports, ~~or loss reports (FHCF-L1A, FHCF-L1B and~~ such information is not subject to the provisions of Section 119.07(1), F.S., or Section 24(a), Article I of the Florida State Constitution. Confidential data and trade secrets reported to the FHCF are protected to the extent allowed by law.

(c) through (4)(l) No change.

(m) For the 2011/2012 Contract Year, the reporting shall be in accordance with Form FHCF-D1A, "Florida Hurricane Catastrophe Fund 2011 Data Call," rev. 01/11, hereby adopted and incorporated by reference into this rule. The form may be obtained from the Fund's Administrator at the address stated in subsection (6) below. A new participant writing covered policies on or after June 1 but prior to December 1, shall report its actual exposure as of December 31 of the Contract Year on or before March 1 of the Contract Year, to the Administrator.

(5) through (6) No change.

(7)(a) For the 2005/2006 and earlier Contract Years the applicable Interim Loss Report is that form that was in effect for the Contract Year as reflected by the revision date on the form. For example, the applicable Interim Loss Report for the Contract Year 2004-2005 is the FHCF-L1A, with the revision date of ~~05/04~~ 05/05.

(b) through (f) No change.

(g) For the 2011/2012 Contract Year, the applicable Interim Loss Report is the "Contract Year 2011 Interim Loss Report, Florida Hurricane Catastrophe Fund (FHCF)," FHCF-L1A, rev. 01/11, which is hereby adopted and incorporated by reference into this rule. The applicable Proof of Loss Report is the "Contract Year 2011 Proof of Loss Report, Florida Hurricane Catastrophe Fund (FHCF)," FHCF-L1B, rev. 01/11, which is hereby adopted and incorporated by reference into this rule. The forms may be obtained from the Fund's Administrator at the address stated in subsection (6) above.

(8) No change.

Rulemaking Authority 215.555(3) FS. Law Implemented 215.555(2), (3), (4), (5), (6), (7), (15) FS. History—New 5-17-99, Amended 6-19-00, 6-3-01, 6-2-02, 11-12-02, 5-13-03, 5-19-04, 8-29-04, 5-29-05, 5-10-06, 5-8-07, 6-8-08, 3-30-09, 8-2-09, 3-29-10, 8-8-10, _____.

19-8.030 Insurer Responsibilities.

(1) through (3)(h) No change.

(i) Data Call means the annual reporting of insured values forms. These forms, as adopted and incorporated into Rule 19-8.029, F.A.C., are the FHCF-D1A for Contract Years after the 2002/2003 Contract Year year and the FHCF-D1A and FHCF-D1B for Contract Year 2002/2003 and all prior Contract Years years.

(j) through (4)(a) No change.

1. For the 2010/2011 and earlier Contract Years, eEach Insurer required to participate in the FHCF must designate a coverage level in the annual Reimbursement Contract, make any required selections therein and execute the Reimbursement Contract and applicable Addenda so that the Contract, including the schedules and applicable Addenda, have been received by June 1 of each Contract Year.

2. For the 2011/2012 and subsequent Contract Years, each Insurer required to participate in the FHCF must designate a coverage level in the annual Reimbursement Contract, make any required selections therein and execute the Reimbursement Contract and applicable Addenda so that the Contract, including the schedules and applicable Addenda, have been received by the March 1 prior to each Contract Year.

(b) through (c) No change.

(d) Optional coverages authorized by law must be chosen by current participants by executing and returning the applicable Addenda to the Reimbursement Contract ~~by June 1~~ of the relevant Contract Year by the date required. New Participants choosing optional coverage must execute and return the applicable Addenda to the Reimbursement Contract for the relevant Contract Year prior to the time in which a covered loss occurs and within 30 days of writing its first covered policy. Any current or New Participant failing to meet these deadlines shall not be eligible for such optional coverage.

(5)(a) through (c) No change.

(d) Resubmissions of Data: With one exception noted below, any Insurer which submits a Data Call, Form FHCF-D1A, with incorrect data, incomplete data, or data in the wrong format and is required to resubmit will be given 30 days from the date on the letter from the FHCF notifying the Insurer of the need to resubmit. An extension of 30 days will be granted if the Insurer can show that the need for the additional time is due to circumstances beyond the reasonable control of the ~~Insurer participant~~. Exception: If the Insurer, at the time it receives notice of the need to resubmit, has already been issued a notice of examinations, the usual 30 day time limitation

(measured from the date of the letter giving notice of the need to resubmit) does not apply. In this situation, the time period in which the Insurer must resubmit is measured by counting backwards 30 days from the date that the examinations are scheduled to begin as reflected on the notice of examinations letter. The FHCF needs the information prior to the examinations; thus, no extensions can be granted.

(6)(a) No change.

(b) New Participants during the period of June 1 through November 30: Those Insurers that first begin writing Covered Policies from June 1 through November 30 of a Contract Year must submit a payment of \$1,000 on or before the date indicated on the invoice. Once a New Participant's Data Call, which is filed on or before March 1 of the Contract Year, has been reviewed by the Administrator and the Company's actual Reimbursement Premium has been determined on its actual exposure, an invoice with the amount due, if any, will be sent to the Company by the Administrator. Payment, if any amounts are shown as due on the invoice, is due within 30 days from the date on the invoice. In no event will the Premium be less than the \$1,000.

(c) through (d) No change.

(7) Examination Requirements. A Company is required to prepare and retain an examination file in accordance with the specifications outlined in the Data Call instructions and a detailed claims listing to support losses reported on the Proof of Loss Report. Such records must be retained until the FHCF has completed its examination of a Company's exposure submission and any loss reports applicable to the Data Call Contract Year and commutation for the Contract Year (if applicable) has been concluded. The records provided for examination must be from the examination file as originally prepared unless a subsequent resubmission was sent to the FHCF. Note that both Citizens and Insurers participating in Quota Share Primary Insurance Arrangements must keep complete and accurate records, including copies of policy declaration pages and supporting claims documents, for the purpose of exposure and loss reimbursement examinations by the FHCF.

(a) Advance Examination Record Requirements: Within 30 days from the date on the letter from the FHCF, Companies are required to provide the FHCF with the records indicated in the applicable Contract Year's; "Exposure Examination Advance Preparation Instructions" or in the applicable Contract Year's "Loss Reimbursement Examination Advance Preparation Instructions". An extension of 30 days may be granted if the Insurer can show that the need for the additional time is due to circumstances beyond the reasonable control of the Insurer participant.

1. For Contract Years prior to the 2003/2004 Contract Year, Form FHCF-API as revised for each Contract Year, is the applicable Exposure Examination Advance Preparation Instructions form to use.

2. For the 2004/2005 Contract Year, the applicable exposure examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Exposure Audit – Contract Year 2004 Advance Preparation Instructions," FHCF-API, rev. 5/04. The applicable loss examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Loss Reimbursement Examination – Contract Year 2004 Advance Preparation Instructions," FHCF-LAPI, ~~rev.~~ 05/06.

3. For the 2005/2006 Contract Year, the applicable exposure examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Exposure Examination – Contract Year 2005 Advance Preparation Instructions," FHCF-API, rev. 5/05. The applicable loss examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Loss Reimbursement Examination – Contract Year 2005 Advance Preparation Instructions," FHCF-LAPI, rev. 05/07.

4. For the 2006/2007 Contract Year, the applicable exposure examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Exposure Examination – Contract Year 2006 Advance Preparation Instructions," FHCF-EAP1, rev. 5/06. The applicable loss examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Loss Reimbursement Examination – Contract Year XXXX Advance Preparation Instructions," FHCF-LAPI, ~~rev.~~ new 05/06.

5. through 8. No change.

9. For the 2011/2012 Contract Year, the applicable exposure examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Exposure Examination – Contract Year 2011 Advance Preparation Instructions," FHCF-EAP1, rev. 01/11. The applicable loss examination instructions form is the "Florida Hurricane Catastrophe Fund (FHCF) Loss Reimbursement Examination – Contract Year 2011 Advance Preparation Instructions," FHCF-LAPI, rev. 01/11.

10.9. These forms are hereby adopted and incorporated by reference into this rule. Copies of these forms may be obtained from the FHCF website, www.sbafla.com/fhcf or by contacting the State Board of Administration. The mailing address is P. O. Box 13300, Tallahassee, Florida 32317-3300. The street address is 1801 Hermitage Blvd., Tallahassee, Florida 32308.

(b) On-site Examination Record Requirements: The FHCF-EAP1, "Exposure Examination Advance Preparation Instructions" form and the FHCF-LAPI, "Loss Reimbursement Examination Advance Preparation Instructions" form each contain a list of the information that the Companies must have available, on-site, on the date the exposure or loss examination is to begin. These records must be made available to the FHCF examiner upon request.

(c) through (8)(e) No change.

(f) For the Contract Year 2011-2012, the applicable “Florida Hurricane Catastrophe Fund Interim Loss Report,” is the FHCF-L1A rev. 01/11 and the applicable “Florida Hurricane Catastrophe Fund Proof of Loss Report,” is the FHCF-L1B rev. 01/11. These forms are hereby adopted and incorporated by reference into this rule.

(g) These forms are hereby adopted and incorporated by reference into this rule and may be obtained from the Fund’s Administrator, Paragon Strategic Solutions Inc., 8200 Tower, 5600 West 83rd Street, Suite 1100, Minneapolis, Minnesota 55437. Companies must submit a detailed claims listing (in a delimited ASCII format) to support the losses reported in the FHCF-L1B, Proof of Loss Report, at the same time it submits its first Proof of Loss Report for a specific Covered Event that qualifies the Company for reimbursement under that Covered Event, and should be prepared to supply a detailed claims listing for any subsequent Proof of Loss Report upon request. Refer to Form FHCF-LAPI for the required file layout. The Proof of Loss Report and the detailed claims listing are required to be sent to the FHCF Administrator, Paragon Strategic Solutions Inc., at the address listed above. If your Company submits its Proof of Loss Reports electronically through the FHCF’s Online Claims System at www.sbafla.com/fhcf, the detailed claims listing may be attached to the Company’s submission.

(9) No change.

(a) Resubmissions of Data: A \$1,000 resubmission fee (for resubmissions that are not the result of an examination by the SBA) will be invoiced by the FHCF for each submission. If a resubmission is necessary as a result of an examination report issued by the SBA, the resubmission fee will be \$2,000. If a Company’s examination-required resubmission is inadequate and the SBA requires an additional resubmission(s), the resubmission fee for each subsequent resubmission shall be \$2,000.

(b) No change.

(c) Consequences for Failure to meet the requirements contained in the FHCF-EAPI, “Exposure Examination Advance Preparation Instructions,” the FHCF-LAPI, “Loss Reimbursement Examination Advance Preparation Instructions,” or the on-site examination record requirements in a timely manner: In addition to other penalties or consequences, the FHCF has the authority, pursuant to Section 215.555(4)(f), F.S., to require that the Insurer pay for the following services under the circumstances outlined below:

1. If an examination is delayed, cannot be conducted as scheduled or cannot be completed and the Insurer is responsible for such, the Insurer shall be required to reimburse the FHCF for all the usual and customary expenses connected to such delay, cancellation or incompleteness.

2. If the FHCF finds any Insurer’s records or other necessary information to be inadequate or inadequately posted, recorded, or maintained, the FHCF may employ experts to reconstruct, rewrite, record, post, or maintain such records or information, at the expense of the Insurer being examined.

3. An Insurer required to reimburse the FHCF for costs as outlined in subparagraphs 1. and 2. immediately above, will owe interest on the amount owed to the FHCF from the date the FHCF pays such expenses until the date payment from the Insurer is received. The applicable interest rate will be the average rate earned by the SBA for the FHCF for the first ~~four~~ **five** months of the current Contract Year plus 5%. Also, the payment of reimbursements or refunds by the FHCF to any Insurer will be offset by any amounts owed by that Insurer to the FHCF.

(10) No change.

(11) Optional Coverage Programs: Except as provided in this subsection, this rule applies to the Additional Coverage Option created in Section 215.555(4)(b)4., F.S., and the Temporary Emergency Additional Coverage Option (“TEACO”) created in Section 215.555(16), F.S., and the Temporary Increase in Coverage Limit Options option created in Section 215.555(17), F.S. (“TICL”). The definition of Premium in paragraph (3)(m), above, does not apply to Section 215.555(4)(b)4., F.S., Additional Coverage Option. With respect to this Option, the word “Premium” when used in this rule shall refer to the amount payable under Section 215.555(4)(b)4., F.S., for this optional coverage. ~~The definition of Premium in paragraph (3)(m), above, does not apply to TEACO. With respect to this Option, the word “Premium” when used in this rule shall refer to the amount payable under Section 215.555(16)(f), F.S., for this optional coverage.~~

(12) No change.

Rulemaking Authority 215.555(3) FS. Law Implemented 215.555 FS. History—New 5-13-03, Amended 5-19-04, 5-29-05, 5-10-06, 5-8-07, 8-13-07, 6-8-08, 3-30-09, 3-29-10, 8-8-10,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Jack E. Nicholson, FHCF Chief Operating Officer, State Board of Administration

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: The Trustees of the State Board of Administration of Florida

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 7, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 10, 2010

WATER MANAGEMENT DISTRICTS

Southwest Florida Water Management District

RULE NO.: 40D-8.624
RULE TITLE: Guidance and Minimum Levels for Lakes

PURPOSE AND EFFECT: Section 373.042, F.S., requires the District to establish minimum flows and levels for surface watercourses, aquifers, and surface waters within the District. That section also requires the District to prepare and update annually a priority list and schedule for the establishment of minimum flows and levels. The District's priority list and schedule includes the establishment of minimum levels for Lake Crystal and North Lake Wales in Polk County. The amendments to Rule 40D-8.624, F.A.C., establish the minimum levels for these lakes.

SUMMARY: The proposed amendments to Rule 40D-8.624, F.A.C., establishes minimum levels for Lake Crystal and North Lake Wales and establishes current guidance levels for these lakes based on current methodologies. The proposed amendments also repeal the previously adopted guidance levels.

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, 373.171 FS.

LAW IMPLEMENTED: 373.036, 373.042, 373.0421, 373.086, 373.709 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: Pamela Gifford, Office of General Counsel, 2379 Broad St., Brooksville, FL 34604-6899, (352)796-7211, (4156) (OGC #2010050)

THE FULL TEXT OF THE PROPOSED RULE IS:

40D-8.624 Guidance and Minimum Levels for Lakes.

(1) through (11) No change.

(12) Levels for lakes established during or after August 7, 2000, are set forth in the following table. After the High Minimum Lake Level and Minimum Lake Level elevation for each lake is a designation indicating the Method used, as described in subsection 40D-8.624(8), F.A.C., to establish the level. Compliance with the High Minimum and Minimum Lake Levels is determined pursuant to paragraphs (6)(b) and (7)(b) above. Guidance Levels established prior to August 7, 2000, are set forth in Table 8-3 in subsection 40D-8.624(13), F.A.C., below.

| Table 8-2 Minimum and Guidance Levels Established During or After August 7, 2000. Levels are elevations, in feet above the National Geodetic Vertical Datum of 1929. | | | | | |
|--|--|---------------------|-------------------------|--------------------|--------------------|
| Location by County and Basin | Name of Lake and Section, Township and Range Information | High Guidance Level | High Minimum Lake Level | Minimum Lake Level | Low Guidance Level |
| (a) through (y) No change. | | | | | |
| (z) In Polk County Within the Peace River Basin | Annie, Lake S-3, T-29S, R-27E | 116.0' | 115.2' (CAT 3) | 112.8' (CAT 3) | 111.7' |
| | Bonnie, Lake S-31, T-29S, R-28E | 105.9' | 105.8' (CAT 3) | 102.1' (CAT 3) | 99.8' |
| | Clinch Lake S-31, T-31S, R-28E | 105.5' | 105.5' (CAT 3) | 104.4' (CAT 3) | 103.1' |
| | Crooked, Lake S-01, T-31S, R-27E | 121.2' | 120.8' (CAT 3) | 117.9' (CAT 3) | 116.4' |
| | Crystal, Lake S-02, T-30S, R-27E | 118.3 | 117.5 (CAT 3) | 114.2 (CAT 3) | 112.7 |
| | Dinner Lake S-15, T-29S, R-27E | 114.4' | 113.6' (CAT 3) | 110.6' (CAT 3) | 109.1' |
| | Eagle Lake S-01, T-29S, R-25E | 129.6' | 129.0' (CAT 3) | 127.9' (CAT 3) | 127.2' |
| | Lee, Lake S-10, T-29S, R-27E | 116.8' | 116.0' (CAT 3) | 113.9' (CAT 3) | 113.1' |
| | Mabel, Lake S-11, T-29S, R-27E | 107.5' | 106.7' (CAT 3) | 103.9' (CAT 3) | 102.5' |
| | McLeod Lake S-07, T-29S, R-26E | 129.4' | 129.4' (CAT 3) | 128.3' (CAT 3) | 127.0' |
| | North Lake Wales S-01, T-30S, R-27E | 109.8 | 109.2 (CAT 3) | 105.7 (CAT 3) | 103.8 |
| | Parker, Lake S-8, T-28S, R-24E | 130.6' | 130.6' (CAT 3) | 129.6' (CAT 3) | 129.0' |
| | Starr, Lake S-14, T-29S, R-27E | 105.8' | 105.0' (CAT 3) | 102.1' (CAT 3) | 100.7' |
| | Venus Lake S-9, T-29S, R-27E | 121.2' | 120.4' (CAT 3) | 118.2' (CAT 3) | 117.4' |

| | | | | | |
|------------------------------|----------------------------------|----|-------------------|-------------------|----|
| | Wales Lake S-01, T-30S, R-27E | ND | 107.7' (CAT 3) | 106.6' (CAT 3) | ND |
| (aa) through (cc) No change. | | | | | |

(13) Guidance Levels established for lakes prior to August 7, 2000, are set forth in the following table:

| Location of Impoundment by County and Basin | High Level in Feet Above Mean Sea Level (msl) | Low Level in Feet Above Mean Sea Level (msl) | Extreme Low Level in Feet Above Mean Sea Level (msl) |
|---|---|--|--|
| (a) through (y) No change. | | | |
| (z) In Polk County Within the Peace River Basin | | | |
| Ada, Lake S33, T28, R27 | 123.00' | 120.00' | 118.00' |
| Altamaha, Lake S11, T30, R27 | 122.50' | 120.00' | 118.00' |
| Amoret, Lake 24, 30, 27 | 115.25' | 113.00' | 111.00' |
| Ariana, Lake 3, 28, 25E | 137.00' | 134.50' | 132.50' |
| Aurora, Lake 13, 30, 28 | 100.00' | 97.00' | 95.00' |
| Banana, Lake 10, 29, 24E | 106.50' | 103.50' | 102.00' |
| Belle, Lake 11, 30, 27 | 120.00' | 117.00' | 115.00' |
| Bess, Lake 18, 29S, 27E | 125.25' | 123.00' | 121.00' |
| Big Gum, Lake 26, 29, R28 | 95.00' | 92.00' | 89.00' |
| Blue, Lake S13, T28, R25 | 149.00' | 146.50' | 144.50' |
| Blue Lake 24, 30S, 27E | 117.00' | 114.00' | -- |
| Bonny, Lake 20, 28S, 24E | 130.50' | 128.00' | 126.00' |
| Buckeye, Lake S22, T28S, R26E | 129.00' | 126.00' | 124.50' |
| Buffum, Lake 12, 31S, 26E | 132.25' | 129.25' | -- |
| Cannon, Lake 19, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Connie, Lake 9, 28S, 26E | 128.75' | 126.50' | 124.50' |
| Cooper (Worth) S02, T30, R27 | 123.50' | 121.00' | 119.00' |
| Crystal, Lake S02, T30, R27 | 121.25' | 118.00' | 115.00' |
| Crystal, Lake S21, T28, R27 | 122.00' | 119.00' | 117.00' |
| Crystal, Lake 23, 29S, 26E | 129.50' | 127.00' | 125.00' |
| Cypress, Lake 36, 29, 28E | 98.50' | 95.00' | 93.00' |
| Lake Daisy S6, T29, R27 | 130.00' | 127.00' | 126.00' |
| Lake Deer 25, 28, 25E | 140.75' | 138.50' | 136.50' |
| Dell, Lake S28, T28, R27 | 123.75' | 121.50' | 119.50' |
| Lake Dexter S2, T29, R26 | 132.00' | 129.00' | 127.50' |
| Easy, Lake 19, 30, 28 | 115.25' | 113.00' | 111.00' |
| Echo, Lake S05, T28, R26 | 131.00' | 128.00' | 126.00' |
| Effie, Lake 3, 30, 27 | 118.00' | 115.00' | 113.00' |
| Elbert, Lake S22, T28, R26 | 135.50' | 133.00' | 131.50' |
| Eloise, Lake 3, 29S, 26E | 132.00' | 129.50' | 127.00' |

| | | | |
|--------------------------------------|---------|---------|---------|
| Fannie, Lake 11, 28S, 26E | 125.75' | 123.50' | 120.00' |
| Lake Florence S35, T28, R26 | 128.75' | 127.00' | 125.00' |
| Lake Fox S6, T29, R27 | 135.00' | 132.00' | 131.00' |
| Garfield, Lake 5, 30, 26E | 104.75' | 101.00' | 100.00' |
| Gator, Lake 26, 30S, 26E | 133.00' | 130.75' | 128.50' |
| George, Lake S06, T28, R26 | 130.00' | 127.50' | 125.50' |
| Gibson, Lake 25, 27S, 23E | 143.50' | 141.50' | 141.50' |
| Gordon, Lake S16, T28, R27 | 119.00' | 116.00' | 114.00' |
| Lake Grassy 2, 29, 25E | 129.00' | 126.50' | 125.50' |
| Lake Gross (Grassy) S14, T29, R26 | 136.00' | 133.50' | 132.00' |
| Hamilton, Lake 18, 28S, 27E | 121.50' | 119.00' | 117.25' |
| Hancock, Lake 8, 29S, 25E | 99.00' | 96.00' | 94.00' |
| Hart, Lake 24, 29S, 26E | 124.50' | 122.00' | 120.00' |
| Hartridge, Lake 8, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Henry, Lake 16, 31S, 26E | 159.00' | 156.00' | 154.00' |
| Henry, Lake 36, 27S, 26E | 126.50' | 124.50' | 122.50' |
| Hickory, Lake 17, 32S, 28E | 98.50' | 96.00' | 94.00' |
| Howard, Lake 30, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Ida, Lake 28, 31S, 28E | 79.00' | 76.50' | 75.00' |
| Ida, Lake S17, T28, R26 | 135.25' | 132.00' | 130.50' |
| Idyl, Lake S16, T28, R26 | 134.00' | 131.50' | 130.00' |
| Idylwild, Lake 18, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Jessie, Lake 12, 28S, 25E | 132.00' | 129.50' | 127.00' |
| Josephine, Lake 13, 30, 27 | 120.00' | 116.50' | 114.50' |
| Josephine, Lake S27, T28, R27 | 121.50' | 118.00' | 116.50' |
| Lee, Lake S16, T28, R27 | 123.50' | 121.50' | 120.00' |
| Lena, Lake 9, 28S, 25E | 137.00' | 134.50' | 132.50' |
| Leonore, Lake 10, 31S, 28E | 87.00' | 84.50' | 83.00' |
| Link, Lake 27, 28S, 26E | 128.00' | 125.00' | 123.00' |
| Little Aurora | 100.50' | 98.00' | 96.00' |
| Little Gum, Lake 35, 29S, 28E | 96.50' | 94.00' | 92.00' |
| Little Lake Hamilton 5, 28S, 27E | 121.50' | 119.00' | 117.25' |
| LuLu, Lake 4, 29S, 26E | 132.00' | 129.50' | 127.00' |
| Mariam, Lake 27, 28S, 26E | 124.75' | 122.75' | 121.00' |
| Marie, Lake S27, T28, R27 | 121.00' | 118.00' | 116.00' |
| Martha, Lake S21, T28, R26 | 142.00' | 139.00' | 137.00' |

| | | | |
|---|--------------------|--------------------|--------------------|
| Maude, Lake S21, T28, R26 | 140.50' | 137.50' | 136.00' |
| May, Lake 29, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Medora, Lake S36, T27, R25 | 138.00' | 134.50' | 133.00' |
| Menzie, Lake S28, T28, R27 | 122.00' | 120.00' | 118.00' |
| Middle Lake Hamilton 7, 28S, 27E | 121.50' | 119.00' | 117.25' |
| Lake Millsite 11, 29, 25E | 123.50' | 121.00' | 119.00' |
| Mirror, Lake 20, 28S, 27E | 132.00' | 129.50' | 127.00' |
| Moody, Lake 17, 31S, R28E | 93.50' | 91.00' | 89.00' |
| Myrtle, Lake 19, 29S, 27E | 118.50' | 116.50' | 114.50' |
| Lake Ned S1, T29S, R26 | 128.50' | 126.00' | 124.00' |
| North Lake Wales S01, T30, R27 | 115.00' | 112.00' | 110.00' |
| Otis, Lake 28, 28S, 25E | 128.00' | 125.00' | 123.00' |
| Pansy, Lake S08, T28, R26 | 129.00' | 126.50' | 124.50' |
| Parker, Lake 32, 29S, 27E | 122.00' | 119.50' | 117.50' |
| Parks, Lake 36, 29S, 28E | 102.50' | 100.00' | 98.00' |
| Polecat, Lake 27, 30S, 26E | 142.00' | 139.50' | 137.50' |
| Reedy, Lake 35, 31S, 28E | 79.75' | 77.25' | 75.25' |
| Reeves, Lake 13, 29S, 26E | 124.50' | 122.00' | 120.00' |
| Lake River S1, T29, R26 | 139.50' | 136.00' | 134.00' |
| Rochelle, Lake 4, 28S, 26E | 128.75' | 126.50' | 124.50' |
| Round, Lake 13, 29S, 26E | 129.25' | 126.50' | 124.50' |
| Roy, Lake 34, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Ruby, Lake 12, 29S, 26E | 125.25' | 123.00' | 121.00' |
| Ruth, Lake S28, T28, R27 | 121.50' | 117.50' | 115.50' |
| Saddlebag, Lake 6, 30S, 29E | 105.00' | 102.00' | 100.00' |
| Saint Anne Lake 14, 30, 28 | 96.00' | 93.00' | 91.00' |
| Sanitary (Mariana), Lake S01, T28, R25 | 137.50' | 135.00' | 133.00' |
| Sara, Lake S17, T28, R27 | 121.50' | 119.00' | 117.25' |
| Scott, Lake 18, 29S, 24E | 168.00' | 165.00' | 164.25' |
| Lake Sears 36, 28, 25E | 141.00' | 138.00' | 136.00' |
| Serena, Lake S12, T30, R27 | 118.00' | 115.00' | 113.00' |
| Shipp, Lake 32, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Silver, Lake 5, 32S, 28E | 103.00' | 100.50' | 98.50' |
| Silver, Lake S20, T28, R26 | 146.50' | 144.00' | 142.00' |
| Smart, Lake 9, 28S, 26E | 128.75' | 126.50' | 124.50' |
| Lake Spirit 35, 28, 25E | 131.50' | 129.00' | 127.00' |

| | | | |
|--|---------|---------|---------|
| Spring, Lake 20, 28S, 27E | 132.00' | 129.50' | 127.00' |
| Streety, Lake 24, 32S, 27E | 105.50' | 102.50' | 101.00' |
| Summit, Lake 34, 28S, 26E | 132.00' | 129.50' | 127.00' |
| Sunset, Lake 10, 30, 28 | 98.00' | 95.50' | 93.50' |
| Surveyors, Lake 26, 30S, 26E | 133.00' | 130.75' | 128.50' |
| Thomas, Lake 1, 30E, 28E | 99.50' | 97.00' | 95.00' |
| Lake Thomas 35, 28, 25E | 132.00' | 128.00' | 126.00' |
| Tractor, Lake 14, 30, 27 | 123.25' | 121.00' | 119.00' |
| Trask, Lake S22, T28, R27 | 113.00' | 108.00' | 106.00' |
| Trout, Lake 34, 32S, 28E | 101.00' | 98.00' | 95.00' |
| Twin, Lakes S11, T30, R27 | 123.75' | 120.00' | 118.00' |
| Walker, Lake 21, 30S, 26E | 141.00' | 137.00' | 135.00' |
| Warren, Lake S11, T30, R27 | 123.50' | 121.00' | 119.00' |
| Weader (Weaver), Lake S03, T30, R27 | 121.75' | 119.00' | 117.00' |
| Winterset, Lake 11, 29S, 26E | 132.00' | 129.50' | 127.00' |
| (aa) through (cc) No change. | | | |

Rulemaking Authority 373.044, 373.113, 373.171 FS. Law Implemented 373.036, ~~373.0361~~, 373.042, 373.0421, 373.086, 373.709 FS. History—New 6-7-78, Amended 1-22-79, 4-27-80, 10-21-80, 12-22-80, 3-23-81, 4-14-81, 6-4-81, 10-15-81, 11-23-81, 1-5-82, 3-11-82, 5-10-82, 7-4-82, 9-2-82, 11-8-82, 1-10-83, 4-3-83, 7-5-83, 9-5-83, 10-16-83, 12-12-83, 5-8-84, 7-8-84, 12-16-84, 2-7-85, 5-13-85, 6-26-85, 11-3-85, 3-5-86, 6-16-86, Formerly 16J-8.678, Amended 9-7-86, 2-12-87, 9-2-87, 2-18-88, 6-27-88, 2-22-89, 3-23-89, 9-26-89, 7-26-90, 10-30-90, 3-3-91, 9-30-91, 10-7-91, 7-26-92, 3-1-93, 5-11-94, 6-6-96, 2-23-97, 8-7-00, 1-8-04, 12-21-04 (13), 12-21-04 (13), 6-5-05, 5-2-06, 1-1-07, 2-12-07, 1-10-08, 2-18-08, 4-7-08, 5-20-08, 5-10-09,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Keith Kolasa, 2379 Broad Street, Brooksville, FL 34604-6899, (352)796-7211, extension 4236

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 14, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 24, 2010

WATER MANAGEMENT DISTRICTS

Southwest Florida Water Management District

RULE NO.: 40D-400.550
 RULE TITLE: General Permit for Construction, Operation and Maintenance of Nonproduction-related Agricultural Facilities

PURPOSE AND EFFECT: The purpose of this rulemaking is to establish a new noticed general environmental resource permit for the construction, operation and maintenance of certain nonproduction-related agricultural facilities. The effect will be to reduce the permit application, fee and regulatory requirements for activities that qualify for this new permit.

SUMMARY: Noticed General Environmental Resource Permits are limited to those activities which have been pre-determined to have minimal individual and cumulative impacts to the water resources of the District. Persons desiring to conduct activities that qualify for a noticed general permit provide notice to the District by submitting an application and fee at least 30 days prior to undertaking the activity, during which time the District will advise if the proposed activities qualify for the requested permit. A new noticed general permit is proposed to allow farms and nurseries to conduct certain specified minimal activities involving passive surface water management systems that avoid wetland areas and rely on vegetated buffers to prevent any water quality or quantity impacts. Qualifying activities include farm worker housing, produce stands and vehicle loading and staging areas. Existing rules require a higher level permit for these activities. Specific conditions for this new permit include: impervious and semi-impervious surface limits of 20% of total land area up to 4 acres; no wetland or other surface water activities or impacts; limited drainage facilities and required buffer areas. Implementation of this noticed general permit will reduce permitting costs for small farm and nursery businesses and regulatory costs for the District, for the activities that qualify for this permit.

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, 373.118 FS.

LAW IMPLEMENTED: 373.413, 373.414, 373.416, 373.419 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: Pamela Gifford, Office of General Counsel, 2379 Broad St., Brooksville, FL 34604-6899, (352)796-7211 (4156) (OGC #2009063)

THE FULL TEXT OF THE PROPOSED RULE IS:

40D-400.550 General Permit for Construction, Operation and Maintenance of Nonproduction-related Agricultural Facilities.

(1) A general permit is hereby granted for the construction, operation, maintenance, alteration or abandonment of minor systems serving any of the following, provided the activities comply with the conditions set forth below:

(a) Seasonal or year-round stands and markets selling exclusively or primarily produce and other farm or nursery products grown on-site.

(b) Farm worker housing and ancillary facilities.

(c) Truck loading and staging areas for transporting farm or nursery products grown on-site.

(d) Nonresidential farm buildings and structures used solely for agricultural purposes and located on a farm or on land that is an integral part of an ongoing farm operation.

(e) Roadway and vehicle parking facilities integral to an activity authorized under this general permit.

(2) This general permit is subject to the following limitations:

(a) Total cumulative building, driveways, parking lot and other impervious and semi-impervious surfaces will not exceed 20% of the total land area up to four (4) acres. This limitation excludes impervious and semi-impervious areas directly related to agricultural production.

(b) No activities will occur in, on or over wetlands or other surface waters.

(c) The activities will not use new surface water drainage facilities larger than one 24-inch diameter pipe or its hydraulic equivalent.

(d) The activities will not use new drainage pumps or other operable structures for stormwater management.

(e) Finished building floors for residential structures will be above the 100-year flood elevation.

(f) All discharge and project runoff locations, excluding runoff from access driveways, will maintain a minimum 75 foot vegetated buffer. This vegetated buffer must include a 25 foot perpetually undisturbed buffer, upland of any wetlands, other surface waters, and drainage ditches.

(g) Impervious and semi-impervious surfaces, excluding access driveways, will maintain a 25 foot vegetated buffer from property boundaries.

(h) Permitted activities are not conducted within the geographic limits of an existing permit issued pursuant to Part IV of Chapter 373, F.S.

(3) This general permit is not available if the proposed activities, considered separately or in combination with other activities conducted pursuant to this permit, exceed or will exceed any of the limitations in subsection (2) above.

(4) The activities undertaken pursuant to this permit shall be taken into account in the determination of post-development conditions for any subsequent exemption or permitting decision that includes the same project area.

Rulemaking Authority 373.044, 373.113, 373.118 FS. Law Implemented 373.413, 373.414, 373.416, 373.419 FS. History—New

NAME OF PERSON ORIGINATING PROPOSED RULE: Mark Luchte, P.E., Agricultural Regulation Program Manager, Southwest Florida Water Management District, Sarasota Service Office, 6750 Fruitville Road, Sarasota, FL 34240-9711, (941)377-3722

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 14, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: December 23, 2010

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Division of Pari-Mutuel Wagering

| | |
|------------|--|
| RULE NOS.: | RULE TITLES: |
| 61D-5.001 | Occupational Licensure |
| 61D-5.003 | Applications for Licensure; Fingerprint Requirements; Exemptions from Fingerprinting |
| 61D-5.004 | Temporary Occupational Licenses |
| 61D-5.005 | Exemptions to Occupational Licensing Requirements |
| 61D-5.006 | Waiver of Criminal Convictions or Other Offenses |

PURPOSE AND EFFECT: The purpose and effect of the proposed rules will be to implement amendments to Section 550.105, F.S., which were effective July 1, 2010, pertaining to pari-mutuel occupational licenses.

SUMMARY: Rule 61D-5.001, F.A.C., addresses the license and renewal periods, fees, and required forms for pari-mutuel occupational licenses. Rule 61D-5.003, F.A.C., addresses certain persons who are exempt from the fingerprint requirement. Rule 61D-5.004, F.A.C., addresses the term of temporary licenses and the requirements for obtaining a temporary license. Rule 61D-5.005, F.A.C., addresses persons in certain positions who are exempt from the occupational license requirements. Rule 61D-5.006, F.A.C., addresses the adoption and incorporation of the license application and request for waiver forms.

OTHER RULES INCORPORATING THIS RULE: None

EFFECT ON THOSE OTHER RULES: None

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The agency has determined that Rule 61D-5.001, F.A.C., will have an adverse impact on small business and will increase regulatory costs by \$200,000 in the aggregate within one year. A SERC has been prepared by the agency. Approximately 18,700 licensees will be affected. The Division is eliminating the one-year option for occupational license fees and requiring a multi-year license. The proposed fees for the multi-year license are the same or less for any 12-month period when compared to current fees in rule. While occupational licensees will realize an aggregate increase of \$314,450 in the initial year of implementation, over the course of the subsequent four years, occupational licensees would save in aggregate \$548,764, resulting in an aggregate net savings of \$234,314. Due to the fact that none of the thresholds of Section 120.541(2)(a), F.S., have been reached, this rule does not require legislative ratification. The agency has determined that Rules 61D-5.003, 5.004, 5.005, and 5.006, F.A.C., will not have an adverse impact on small business and will not increase regulatory costs by \$200,000 in the aggregate within one year.

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: 550.0251(3), 550.105(2)(b), (6), (10) FS.

LAW IMPLEMENTED: 550.0251(3), 550.105(2)(b), (6), (10) 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: February 1, 2011, 10:00 a.m. – Noon

PLACE: Florida Department of Business and Professional Regulation, Northwood Centre, Board Room, 1940 N. Monroe Street, Tallahassee, Florida 32399

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: Mary Polombo at (850)413-0750. 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 RULES IS: Mary Polombo, Clerk, Division of Pari-Mutuel Wagering, 1940 North Monroe Street, Tallahassee, Florida 32399-1035

THE FULL TEXT OF THE PROPOSED RULES IS:

61D-5.001 Occupational Licensure.

(1)(a) The permitholder shall provide to the division the weekly payroll without compensation amounts for verification that all persons working at a permitholder’s facility are licensed.

~~(b) The permitholder shall provide a weekly list of persons whose employment with the permitholder has been terminated, resigned or abandoned.~~

(2)(a) Any person desiring an initial occupational license pursuant to Section 550.105, F.S., Chapter 550, Florida Statutes, shall pay the appropriate occupational and fingerprint fees as set forth by Section 550.105, Florida Statutes, and shall file with the division a completed Form DBPR PMW-3120, Individual Occupational License Application, or Form DBPR PMW-3130, Business Occupational License Application, effective _____, adopted herein by reference, and can be obtained at www.myfloridalicense.com/dbpr/pmw or by contacting the Division of Pari-Mutuel Wagering at 1940 North Monroe Street, Tallahassee, Florida 32399-1037 ~~at adopted and incorporated by Rule 61D-10.001, Florida Administrative Code.~~

(b) Any person desiring to renew an occupational license pursuant to Section 550.105, F.S., shall file with the division a completed Form DBPR PMW-3125, Individual Occupational License Renewal Application, or Form DBPR PMW-3135, Business Occupational License Renewal Application, effective _____, adopted herein by reference, and can be obtained at www.myfloridalicense.com/dbpr/pmw or by contacting the Division of Pari-Mutuel Wagering at 1940 North Monroe Street, Tallahassee, Florida 32399-1037.

(c) Applicants shall also include payment of the license fee as follows:

1. \$120 for a Business Occupational License;
2. \$80 for a Professional Occupational License; or
3. \$30 for a General Occupational License.

(3) All occupational and fingerprint fees are nonrefundable, except in situations where the applicant was charged in error.

(4) Pari-mutuel occupational licenses issued and renewed pursuant to Section 550.105, F.S., shall have an effective date of July 1st and shall be valid for a period of three fiscal years. Applications for an initial pari-mutuel occupational license or for renewal of a pari-mutuel occupational license shall be submitted between May 1st and June 30th for the license period beginning July 1st of the next fiscal year. Applications received outside of this period shall have an effective date beginning July 1st of the state fiscal year in which the application was received. Application forms may be obtained and filed at each pari mutuel facility in Florida or the Division of Pari Mutuel Wagering, Licensing Section, 1940 North Monroe Street, Northwood Centre, Tallahassee, Florida 32399-1037. Applicants shall use the following forms adopted and incorporated by Rule 61D-10.001, Florida Administrative Code:

~~(a) Business Occupational License Application shall be made on Form DBPR PMW-3130, Business Occupational License Application.~~

~~(b) Individual Occupational License Application shall be made on Form DBPR PMW-3120, Individual Occupational License Application.~~

~~(5)(c) A request for a waiver Request for Waiver shall be made on Form DBPR PMW-3180, Request for Waiver, effective _____, adopted herein by reference, and can be obtained at www.myfloridalicense.com/dbpr/pmw or by contacting the Division of Pari-Mutuel Wagering at 1940 North Monroe Street, Tallahassee, Florida 32399-1037.~~

~~(6)(d) A request to upgrade a pari-mutuel occupational license Request to Upgrade License shall be made on Form DBPR PMW-3170, License Upgrade License Application, effective _____, adopted herein by reference, and can be obtained at www.myfloridalicense.com/dbpr/pmw or by contacting the Division of Pari-Mutuel Wagering at 1940 North Monroe Street, Tallahassee, Florida 32399-1037.~~

~~(7)(5) License application forms and fingerprint cards produced by and submitted through the Association of Racing Commissioners International (ARCI) or the National Racing Compact (NRC) under the Federal Pari-Mutuel Licensing Act of 1988 will be accepted by the division.~~

Rulemaking Specific Authority 550.0251(3), 550.105(2)(b), (10) FS. Law Implemented 550.0251, 550.105 FS. History—New 10-20-96, Amended 12-15-97, 4-12-06,_____.

61D-5.003 Applications for Licensure; Fingerprint Requirements; Exemptions from Fingerprinting.

The following occupations or groups of persons are exempt from the fingerprint requirements of Section 550.105, F.S. Florida Statutes:

(1) Any person who has applied for and been granted an occupational license by the division in the previous five fiscal years, ~~provided that such person was fingerprinted as part of the application for such license;~~

~~(2) Any applicant for a restricted license who has not been previously convicted of a crime included in Sections 550.105(4)(b) or (c), Florida Statutes;~~

~~(2)(3) A sworn law enforcement or corrections officer certified pursuant to Section 943.1395, F.S. Florida Statutes, who provides the division evidence of current certification from the Florida Criminal Justice Standards and Training Commission and is working in a security or safety position;~~

~~(3)(4) An applicant who has been granted a diplomatic status by the United States Government; and~~

~~(4) Any person whose fingerprints have been deemed “unclassifiable” twice by the Federal Bureau of Investigations; and~~

~~(5) An applicant who is 70 years of age or older. Applicants 70 years of age or older must instead submit \$24 \$23 for a background information records check through the Florida Department of Law Enforcement.~~

Rulemaking Specific Authority 550.0251(3), 550.105(2)(b), (10) FS. Law Implemented 550.105 FS. History—New 10-20-96, Amended 4-12-06,_____.

61D-5.004 Temporary Occupational Licenses.

(1) A temporary license can be obtained on behalf of a greyhound owner, horse owner, stable name, or kennel name upon submission to the division of Form DBPR PMW-3110, Animal Owner Owners Temporary License Application, effective _____, adopted herein by reference, and can be obtained at www.myfloridalicense.com/dbpr/pmw or by contacting the Division of Pari-Mutuel Wagering at 1940 North Monroe Street, Tallahassee, Florida 32399-1037, ~~adopted and incorporated by Rule 61D-10.001, Florida Administrative Code~~, the license fee, and the fingerprint fee if required, by the horse owner’s licensed trainer, or by the greyhound owner’s licensed kennel operator or trainer. The division shall issue the temporary license if the division verifies that the owner is in good standing in Florida and in all racing jurisdictions.

(2) A temporary license shall be issued to an applicant who is required to provide fingerprints under subsection 61D-5.003(1), F.A.C., upon submission to the division of Form DBPR PMW-3120, Individual Occupational License Application, or Form DBPR PMW-3125, Individual Occupational License Renewal Application, adopted by reference in Rule 61D-5.001, F.A.C.

(a) Only one temporary license shall be issued to any person in any fiscal ~~licensing~~ year.

(b) A temporary license ~~for an owner~~ is valid for no more than 90 ~~30~~ calendar days from the date of issuance. A pari-mutuel occupational one-year or three-year license will be processed upon completion of the licensure requirements by the recipient of a temporary license ~~owner~~.

(c) If the recipient of a temporary license ~~owner~~ fails to complete the licensure process within 90 ~~30~~ calendar days from the date the temporary license is issued, the permanent temporary license shall be denied ~~expire~~ and the recipient of the temporary license ~~owner's animals~~ shall not be eligible to participate in a pari-mutuel wagering in this state ~~race~~.

(d) If the recipient of a temporary license ~~owner~~ completes the licensure process before ~~after~~ the 90-day ~~30-day~~ temporary license has expired, a license shall be processed for the remaining portion of the same licensing period ~~year~~. ~~In the case of a three-year license, the license will be processed for the remaining portion of the three-year term.~~

~~(3)(2)~~ Any recipient of a temporary license ~~applicant~~ who fails to complete the licensure process upon being issued a temporary license shall not be issued another temporary license until the licensee has, at least once, satisfactorily completed the licensure process.

Rulemaking Specific Authority 550.0251(3), 550.105(2)(b), (6) FS. Law Implemented 550.0251, 550.105 FS. History--New 10-20-96, Amended 12-15-97, 4-12-06,_____.

61D-5.005 Exemptions to Occupational Licensing Requirements.

(1) The following are exempted from occupational licensing requirements:

(a) Sworn law enforcement and corrections officers, certified pursuant to Section 943.1395, F.S. Florida Statutes, performing in a security or safety position, other than the chief of security at a track or fronton.

(b) Firefighters, emergency medical technician (b) companies, and emergency medical technicians.

~~(c)(b)~~ Persons working for a vendor or contractual concessionaires providing supplies other than feed or medicine who make deliveries to nonrestricted areas of the permitholder premises and who are not employed on the permitholder premises. Such employees shall be permitted to make deliveries to a restricted area if issued a pass by the permitholder security.

~~(d)(e)~~ Businesses and employees of businesses providing occasional maintenance or plant improvement services to the facility or equipment, or providing construction services which are not related to the making of pari-mutuel pools, the conduct of racing or jai alai games or the direct care of racing animals.

~~(e)(d)~~ Upon adequate proof provided to the division, shareholders, who otherwise would be required to have an occupational license, owning less than ten percent ~~(40%)~~ of the outstanding stock or equity interest of any entity licensed by the division, will not be required to have such a license merely

by their connection to a company. Such a shareholder shall not be granted access to any restricted area of a pari-mutuel wagering facility by virtue of their ownership interest without having obtained a pari-mutuel occupational license.

(2) Permitholder security shall maintain a list of unlicensed persons working in restricted ~~and unrestricted~~ areas on the permitholder premises. Said list shall be available at all times for review by division personnel. All passes to restricted areas shall contain a beginning and ending date of validity and shall state the work hours during which access to restricted areas is allowed. Unlicensed persons working in restricted areas of the permitholder facility shall be in possession of a valid pass issued by permitholder security.

Rulemaking Specific Authority 550.0251(3), 550.105(2)(b), (10) FS. Law Implemented 550.0251, 550.105, 559.79 FS. History--New 10-20-96, Amended 4-12-06,_____.

61D-5.006 Waiver of Criminal Convictions or Other Offenses.

(1) Any applicant for an occupational license who is subject to denial on the basis of a criminal conviction or discipline by any racing jurisdiction may seek a waiver from the division director. The applicant shall submit Form DBPR PMW-3120, Individual Occupational License Application, adopted ~~and incorporated~~ by reference in Rule 61D-5.001, F.A.C., Rule 61D-10.001, Florida Administrative Code, the annual license fee and fingerprint fee, a complete set of fingerprints on a card supplied by the division, and Form DBPR PMW-3180, Request for Waiver, adopted ~~and incorporated~~ by reference in Rule 61D-5.001, F.A.C. Rule 61D-10.001, Florida Administrative Code. The applicant shall also schedule a waiver interview with the Office of Investigations. Failure to participate in a waiver interview or to disclose any pertinent information regarding criminal convictions, or discipline by any racing jurisdiction shall result in a denial of the request for waiver.

(2) The applicant shall establish proof of rehabilitation and demonstrate good moral character. The waiver applies to criminal convictions or discipline by any racing jurisdiction disclosed to the division, unless revoked by the division for violation of Chapter 550, F.S., or these rules.

(3) No applicant for a waiver shall be allowed to work in any capacity as an occupational licensee until a license is issued based upon a waiver, granted by the director.

Rulemaking Specific Authority 550.0251(3), 550.105(2)(b), (10) FS. Law Implemented 550.0251, 550.105 FS. History--New 10-20-96, Amended 12-15-97, 4-12-06,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Milton Champion, Director, Division of Pari-Mutuel Wagering
 NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Charlie Liem, Secretary, Department of Business and Professional Regulation

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 17, 2010
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: October 29, 2010

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 Chiropractic

RULE NO.: 64B2-13.004
 RULE TITLE: Continuing Education
 PURPOSE AND EFFECT: The Board proposes the rule amendment to change the requirements for continuing education for chiropractors certified in acupuncture.

SUMMARY: Requirements for continuing education for chiropractors certified in acupuncture will be changed.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 456.025(7), 460.408(3) FS.
 LAW IMPLEMENTED: 456.013(6), 456.025(7), 456.036(10), 460.408 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: Bruce Deterding, Executive Director, Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B2-13.004 Continuing Education.

(1) through (2) No change.

(3) Each licensee certified in acupuncture by the Board shall obtain four (4) twelve (12) hours of Board approved acupuncture continuing education. Two (2) hours shall be in the area of safety and risk management and two (2) hours shall be in the area of technique. These twelve (12) hours shall be obtained as part of the forty (40) hours required in each

licensure biennium. Licensees certified in acupuncture must complete the hours required in subsection 64B2-13.004(2), F.A.C.

(4) through (14) No change.

Rulemaking Authority 456.025(7), 460.408(3) FS. Law Implemented 456.013(6), 456.025(7), 456.036(10), 460.408 FS. History—New 1-10-80, Amended 11-25-80, 1-13-82, Formerly 21D-13.04, Amended 6-22-86, 7-5-87, 1-25-88, 10-17-90, 10-15-92, Formerly 21D-13.004, Amended 10-26-93, Formerly 61F2-13.004, Amended 3-16-95, 7-18-95, 6-11-96, Formerly 59N-13.004, Amended 6-24-98, 8-4-99, 7-11-02, 11-30-03, 4-17-05, 11-14-06, 11-13-07, 7-1-09, 5-17-10,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Chiropractic Medicine

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 10, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 24, 2010

DEPARTMENT OF HEALTH

Board of Chiropractic

RULE NO.: 64B2-14.001
 RULE TITLE: Trust Accounting Procedures
 PURPOSE AND EFFECT: The Board proposes the rule amendment to change the requirements for trust accounts.

SUMMARY: Requirements for trust accounts will be changed.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 460.405 FS.

LAW IMPLEMENTED: 460.413(1)(z) 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: Bruce Deterding, Executive Director, Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B2-14.001 Trust Accounting Procedures.

(1) The provisions of this rule apply to all trust funds received or disbursed by chiropractors in the course of their professional practice. "Trust funds" are defined as unearned fees in the form of cash or property other than cash, equaling five hundred and one dollars (\$501.00) up to a maximum of one thousand five hundred dollars (\$1,500.00) which are received by a chiropractor prior to the chiropractor rendering his services or his selling of goods and appliances. Chiropractors shall not retain unearned fees exceeding one thousand five hundred dollars (\$1,500.00).

(2) through (4) No change.

Rulemaking Specific Authority 460.405 FS. Law Implemented 460.413(1)(z) FS. History--New 1-10-80, Formerly 21D-14.01, 21D-14.001, 61F2-14.001, 59N-14.001, Amended 3-23-00,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Chiropractic Medicine
NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Chiropractic Medicine
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 10, 2010
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 10, 2010

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NOS.: RULE TITLES:
64B3-1.006 Notices, Current Address of Licensees

64B3-1.008 Board Meetings

PURPOSE AND EFFECT: The Board proposes the rule amendment to update language concerning notifying the department via electronic methods and to update the type of board meetings.

SUMMARY: Language concerning notifying the department via electronic methods will be updated; language concerning the type of board meetings will be updated.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 456.011, 483.805 FS.

LAW IMPLEMENTED: 286.0105, 456.011 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 RULES IS: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULES IS:

64B3-1.006 Notices, Current Address of Licensees.

Each person holding a license issued pursuant to Chapter 483, Part III, Florida Statutes, must maintain on file with the Department the current mailing address and primary practice location at which any notice required by law may be served by the Department or its agent. Within 60 days of changing either address, whether or not within this state, the licensee shall notify the Department in writing or via electronic methods of the new address and designate at which address the licensee may be served with notices or other documents.

Rulemaking Specific Authority 456.035 FS. Law Implemented 456.035(1), 483.817, 483.819 FS. History--New 3-15-93, Formerly 21KK-1.006, 61F3-1.006, 59O-1.006, Amended 10-29-02,_____.

64B3-1.008 Board Meetings.

(1) For purposes of Board member compensation pursuant to Section 456.011(4), Florida Statutes, "other business involving the Board" is defined to include:

(a) through (b) No change.

(c) Board meetings or Board committee meetings held via teleconference that last four (4) hours or more.

(c) through (h) renumbered (d) through (i) No change.

(2)(a) No change.

(b) through (d) No change.

Rulemaking Specific Authority 456.011, 483.805 FS. Law Implemented 286.0105, 456.011 FS. History--New 3-15-93, Formerly 21KK-1.008, 61F3-1.008, Amended 2-7-95, Formerly 59O-1.008, Amended 3-20-01, 9-29-02,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Clinical Laboratory Personnel

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 27, 2010

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NO.: 64B3-2.002
 RULE TITLE: Clinical Laboratory Personnel
 PURPOSE AND EFFECT: The Board proposes the rule amendment to update language concerning direct supervision.
 SUMMARY: Language concerning direct supervision will be updated.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 483.805(4), 483.811(4) FS.
 LAW IMPLEMENTED: 483.035(1), 483.803, 483.811(3), (4) 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 RULES IS: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULES IS:

64B3-2.002 Clinical Laboratory Personnel.

(1) through (5) No change.

(6) Direct supervision means supervision by a director, supervisor, or technologist who is on the premises ~~and~~ ~~or~~ is available to the laboratory when test procedures are being performed and is responsible for the oversight of testing and reporting of results.

Rulemaking Specific Authority 483.805(4), 483.811(4) FS. Law Implemented 483.035(1), 483.803, 483.811(3), (4) FS. History--New 11-4-93, Formerly 61F3-2.002, Amended 11-21-94, 7-12-95, 5-15-96, Formerly 59O-2.002, Amended 3-19-98, 12-13-98, 9-27-00, 9-9-02, 2-1-04, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Clinical Laboratory Personnel

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 27, 2010

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NO.: 64B3-3.002
 RULE TITLE: Personnel of Clinical Laboratory Personnel Training Programs

PURPOSE AND EFFECT: The Board proposes the rule amendment to update language concerning rules that are referenced in the rule.

SUMMARY: Referenced rules will be updated.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 483.805(4), 483.811(2) FS.

LAW IMPLEMENTED: 483.800, 483.809, 483.811 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: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B3-3.002 Personnel of Clinical Laboratory Personnel Training Programs.

(1) A clinical laboratory personnel training program shall have a program director who holds national certification from any Board listed in subsections 64B3-5.002 ~~64B3-5.007(2)~~ ~~and~~ ~~(4)~~, F.A.C., and

(a) through (b) No change.

(2) through (4) No change.

Rulemaking Specific Authority 483.805(4), 483.811(2) FS. Law Implemented 483.800, 483.809, 483.811 FS. History--New 12-28-94, Amended 3-28-95, 7-12-95, 4-24-96, Formerly 59O-3.002, Amended 9-20-98, 12-13-98, 11-15-99, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Clinical Laboratory Personnel

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 27, 2010

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NO.: 64B3-4.001 RULE TITLE: Trainee Registration

PURPOSE AND EFFECT: The Board proposes the rule amendment to update language concerning requirements of training program for trainee registration.

SUMMARY: Language concerning requirements of the training program will be updated.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 483.805(4) FS.

LAW IMPLEMENTED: 483.809(3), 483.811(2), (3), (4), 483.825 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: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B3-4.001 Trainee Registration.

(1) through (4) No change.

(5) All trainee applicants shall submit either a certified copy of a high school diploma or its equivalent, or an official transcript from a training program as described in subsection (1) above, sent directly to the Department.

(6) If the trainee is unable to complete the training by the date indicated on the application for initial registration due to the reasons set forth in subsection (7), then the ~~training program director is responsible for ensuring that coordinator must submit to the Board of Clinical Laboratory Personnel~~ Form #DH-MQA 1165 (11/08) "Request to Extend Trainee Registration" which is incorporated by reference herein, copies of which can be obtained from the Board office at 4052 Bald

Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257 or from its website at <http://www.doh.state.fl.us/mqa/ClinLab/index.html>, is submitted to the Board.

(7) No change.

Rulemaking Authority 483.805(4) FS. Law Implemented 483.809(3), 483.811(2), (3), (4), 483.825 FS. History—New 7-20-93, Formerly 21KK-4.001, 61F3-4.001, Amended 4-10-96, 7-3-97, Formerly 59O-4.001, Amended 3-19-98, 2-15-01, 3-24-02, 3-30-04, 6-17-09, 5-11-10, 7-20-10,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Clinical Laboratory Personnel

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 27, 2010

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NO.: 64B3-5.0011 RULE TITLE: Definitions

PURPOSE AND EFFECT: The Board proposes the rule amendment to remove language concerning requirements of training program for trainee registration.

SUMMARY: Language concerning requirements for training program for trainee registration will be removed.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 483.805, 483.823 FS.

LAW IMPLEMENTED: 483.823 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: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B3-5.0011 Definitions.

(1) through (20) No change.

(21) "CAAHEP" means The Commission Council on Accreditation of Allied Health Education Programs.

~~(22) "CAHEA" means The Committee on Allied Health Education and Accreditation.~~

~~(22)(23)~~ "CLDir" means Clinical Laboratory Director.

~~(24) "CLS" means Clinical Laboratory Scientist.~~

(25) through (47) renumbered (23) through (45) No change.

~~(46)(48)~~ "Medical Technology Training Program" means an ABHES, CAAHEP, ~~CAHEA~~, NAACLS, ~~military or~~ board approved training program for clinical/medical laboratory scientists ~~(CLS)~~ or medical technologists (MT), pursuant to subsections 64B3-2.003(9) and (16), F.A.C., or Department of Defense programs that are equivalent to a board approved training program.

~~(47)(49)~~ No change.

Rulemaking Authority 483.805, 483.823 FS. Law Implemented 483.823 FS. History--New 6-29-06, Amended 12-16-07, 4-28-10,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Clinical Laboratory Personnel

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 27, 2010

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NO.: RULE TITLE:

64B3-5.002 Supervisor

PURPOSE AND EFFECT: The Board proposes the rule amendment to update the examinations for clinical laboratory personnel.

SUMMARY: Examinations for clinical laboratory personnel will be updated.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 483.805, 483.823 FS.

LAW IMPLEMENTED: 483.823 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: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B3-5.002 Supervisor.
Qualifications and Responsibilities.

(1) Qualification. Degrees or semester hours of academic credit required in this section shall be obtained at a regionally accredited college or university or by foreign education equated pursuant to subsection 64B3-6.002(6), F.A.C. ~~In order~~ To be licensed as a supervisor, an applicant shall be licensed or meet the requirements for licensure as a technologist, have a Board approved 2-hour course relating to the prevention of medical errors, which shall include root-cause analysis, error reduction and prevention, patient safety, complete an educational course acceptable to the Department on human immunodeficiency virus and acquired immune deficiency syndrome, and one of the following:

| Specialty | Option | Education | Training/Experience | Examination |
|--|--------|---|--|--|
| (a) Microbiology, Serology/ Immunology, Clinical Chemistry, Hematology, Immunohematology, Blood Banking (Donor Processing), and Cytogenetics | 1 | Doctoral Degree in Clinical Laboratory, Chemical or Biological Science | One year of pertinent clinical laboratory experience in the category in which licensure is sought, and 25 hours of Board-approved continuing education in supervision and administration | |
| | 2 | Doctoral Degree in Clinical Laboratory, Chemical or Biological Science | One year of pertinent clinical laboratory experience in the category in which licensure is sought | DLM(ASCP) or CLSup(NCA) for all categories, SC(ASCP) for clinical chemistry, SH(ASCP) for hematology and SBB(ASCP) for blood banking and immunohematology |
| | 3 | Masters Degree in Clinical Laboratory, Chemical or Biological Science | Three years of pertinent clinical laboratory experience, with at least 1 year experience in the category in which licensure is sought, and 25 hours of Board-approved continuing education in supervision and administration | |
| | 4 | Masters Degree in Clinical Laboratory, Chemical or Biological Science | Three years of pertinent clinical laboratory experience, with at least 1 year experience in the category in which licensure is sought | DLM(ASCP) or CLSup(NCA) for all categories, SC(ASCP) for clinical chemistry, SH(ASCP) for hematology and SBB(ASCP) for blood banking and immunohematology |
| | 5 | Bachelors Degree with 24 semester hours of academic science including 8 semester hours of biological sciences and 8 semester hours of chemical sciences | Five years of pertinent clinical laboratory experience, with at least 2 years experience at the Technologist level, and at least 1 year experience in the category in which licensure is sought, and 25 hours of Board-approved continuing education in supervision and administration | |
| | 6 | Bachelors Degree with 24 semester hours of academic science including 8 semester hours of biological sciences and 8 semester hours of chemical sciences | Five years of pertinent clinical laboratory experience, with at least 2 years experience at the Technologist level, and at least 1 year experience in the category in which licensure is sought | DLM(ASCP) or CLSup(NCA) for all categories, SC(ASCP) for clinical chemistry, SH(ASCP) for hematology and SBB(ASCP) for blood banking and immunohematology |

Specialty (b) through (f) No change.

Option

Education

Training/Experience

Examination

(2) In lieu of one year of experience required by subsection 64B3-5.002(1), F.A.C., an applicant may use Board certification obtained by examination in one or more of the laboratory specialties through the Board of Certification Registry of The American Society for Clinical Pathology, ~~National Credentialing Agency of Laboratory Personnel~~, The National Registry of Certified Chemists, American Academy of Microbiology, American Medical Technologists, American Board of Bioanalysis, American Association of Bioanalysts, American Board of Clinical Chemistry, American Board of Medical Microbiology, American Board of Medical Genetics, American Board of Medical Laboratory Immunology, or American Board of Histocompatibility and Immunogenetics. This certification shall not substitute for the one year of pertinent clinical laboratory experience in an individual category for which licensure is sought.

(3) No change.

(4) The Board approved Supervision and Administration examinations, used in lieu of the required 25 hours of supervision and administration continuing education are:

(a) The Diplomate in Laboratory Management examination administered by the American Society for Clinical Pathology (ASCP) ~~or the Clinical Laboratory Supervisor examination administered by the National Credentialing Agency for Laboratory Personnel (NCA) for all specialty areas,~~

(b) through (i) No change.

| Specialty | Option | Education | Training/Experience | Certification |
|-----------------------------|--------|---|---|--|
| All Specialties | 1 | Licensed physician (does not require a separate laboratory director license) | | Certification in Clinical Pathology by the ABP or AOBP. |
| | 2 | Licensed physician (does not require a separate laboratory director license) | | Certification in the pertinent laboratory specialty by ABIM, AOBIM, ABMM, ABCC, ABNM, AOBNM, ABMG, ABB, ABMLI, ABHI. |
| | 3 | Licensed physician (does not require a separate laboratory director license) | Four years of pertinent clinical laboratory experience (post-graduate), with two years experience in the specialty to be directed | |
| Histology, Cytology | | Licensed physician (does not require a separate laboratory director license) | | Certification in Anatomical Pathology or Cytopathology by ABP or AOBP. For dermatopathology only, certification in Dermatopathology by the ABD or AOBP. |
| Oral Pathology Laboratories | | Licensed physician or dentist (does not require a separate laboratory director license) | | Certification in Anatomical Pathology by ABOP, ABP, or AOBP. |
| Microbiology | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | Certification in Clinical Microbiology by ABMM, HCLD(ABB) with certification in Microbiology, or CLDir(NCA) as Generalist or with certification in Microbiology. |
| Hematology | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | HCLD(ABB) in Hematology or CLDir(NCA) as Generalist with certification in Hematology. |
| Cytogenetics | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | Certification in Clinical Cytogenetics by ABMG. |
| Serology/Immunology | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | Certification in Clinical Immunology by ABMLI, HCLD(ABB) with certification in Immunology, or CLDir(NCA) as Generalist , or Diplomate of ABHI. |
| Clinical Chemistry | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | Certification in Clinical Chemistry by ABCC, HCLD(ABB) with certification in Chemistry, CLDir(NCA) as Generalist or with certification in Chemistry, or certification in Clinical Chemistry or Toxicological Chemistry by NRCC. |
| Andrology | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | HCLD(ABB) with certification in Andrology. |
| Embryology | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | ELD(ABB) or HCLD(ABB) with certification in Embryology. |
| Histocompatibility | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | Diplomate of the ABHI or HCLD(ABB) with certification in Immunology. |
| Molecular Pathology | | Doctoral Degree in a chemical, biological, or clinical laboratory science | | Certification in Molecular Pathology by ABCC, certification in Molecular Genetics by ABMG, or HCLD(ABB) with certification in Molecular Diagnostics. |

Rulemaking Authority 483.805(4) FS. Law Implemented 381.0034(3), 483.800, 483.809, 483.823(1), 483.824 FS. History–New 6-6-85, Formerly 10D-41.67, Amended 3-11-90, Formerly 10D-41.067, Amended 7-1-97, Formerly 59O-5.007, Amended 5-26-98, 3-2-99, 3-24-02, 10-14-02, 4-20-04, 2-23-06, 3-17-08, 6-17-09, 12-30-09,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Clinical Laboratory Personnel
NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: December 31, 2009

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

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|------------|---|
| RULE NOS.: | RULE TITLES: |
| 64B3-6.002 | Documentation for Licensure |
| 64B3-6.003 | Personnel Licensure – Temporary License |

PURPOSE AND EFFECT: The Board proposes the rule amendment to clarify language concerning the American Society for Clinical Pathology Board of Certification and to clarify language concerning the temporary license.

SUMMARY: Language concerning American Society for Clinical Pathology Board of Certification will be clarified; language concerning the temporary licensure will be clarified.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 483.805(4), 483.823 FS.
LAW IMPLEMENTED: 456.013, 483.809, 483.813, 483.815, 483.823 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: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B3-6.002 Documentation for Licensure.

The following is a list of acceptable documents which shall be submitted to the Board as appropriate for the type of license sought ~~in order~~ to show eligibility for the license:

- (1) through (5) No change.
- (6) Foreign credentials evaluation which includes a breakdown of all college level courses by credit hours and subject sent directly to the board office by one of the following evaluators:
 - (a) No change.
 - (b) American Society for Clinical Pathology Board of Certification Registry.
 - (c) through (m) No change.
 - (7) through (8) No change.

Rulemaking Authority 483.805(4) FS. Law Implemented 483.815, 483.823 FS. History–New 1-9-94, Amended 7-13-94, Formerly 61F3-6.002, Amended 12-28-94, 5-29-95, Formerly 59O-6.002, Amended 8-27-97, 10-14-02, 4-13-04, 6-17-09,_____.

64B3-6.003 Personnel Licensure – Temporary License ~~Permit~~.

(1) The Department shall issue a ~~one~~ temporary license to an applicant who has applied and satisfied all Department application requirements for licensure and has been accepted to take a Board approved national examination for a period not to exceed one year.

- (2) through (3) No change.

~~Rulemaking Specific~~ Authority 483.805(4) FS. Law Implemented 456.013, 483.809, 483.813, 483.815, 483.823 FS. History–New 6-6-85, Formerly 10D-41.71, Amended 7-4-89, Formerly 10D-41.071, 61F3-6.003, Amended 8-1-95, Formerly 59O-6.003, Amended 8-27-97, 9-16-03, 4-13-04, 12-23-08,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Clinical Laboratory Personnel
NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 27, 2010

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

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|-------------|--|
| RULE NO.: | RULE TITLE: |
| 64B3-10.005 | Scope of Practice Relative to Specialty of Licensure |

PURPOSE AND EFFECT: The Board proposes the rule amendment to clarify which specialties may perform certain testing.

SUMMARY: Which specialties may perform certain testing will be clarified.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 483.805(4) FS.

LAW IMPLEMENTED: 483.813, 483.823, 483.825 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: Bruce Deterding, Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULE IS:

64B3-10.005 Scope of Practice Relative to Specialty of Licensure.

The following rules are not intended to prevent collection and storage of specimens or the performance of manual pretesting procedures by persons who are exempt by statute or statutorily authorized within their scope of practice. Clinical laboratory personnel qualified as a physician director, a licensed director, supervisor, technologist or technician in the specialty or specialties indicated can perform testing identified as being within the specialty. Tests which are not yet classified shall be assigned by the Board upon review.

(1) through (13) No change.

(14) The purpose of the specialty of molecular pathology is the use of molecular techniques for the characterization of gene expression (protein, RNA), genetic lesions (DNA) in cells, gene products (proteomics) and analysis on human DNA, RNA and chromosomes to detect heritable or acquired disease-related genotypes, mutations, and phenotypes. It includes the study of how the changes found lead to the disease process, monitoring of the effectiveness of therapy, and detection of residual disease. Techniques included are but not limited to immunohistochemistry, in situ hybridization, mutational analysis, protein analysis, polymerase chain reactions, cell culture and isolation, expression profiling, blotting and microarrays. Clinical laboratory personnel who are licensed in the specialties of microbiology, serology/immunology, clinical chemistry, hematology, immunohematology, and molecular pathology may perform all testing identified as being within the scope of the specialty of molecular pathology.

(15) The purpose of the specialty of histocompatibility is to insure the best possible results of the determination of tissue compatibility, prevent transmitted infections, and to investigate and evaluate post-transplant problems. The specialty encompasses blood typing, HLA typing, HLA antibody screening, disease markers, Cluster Designation specific to tissue compatibility, flow cytometry, crossmatching, HLA antibody identification, lymphocyte immunophenotyping, immunosuppressive drug assays, allogenic, isogenic and autologous bone marrow processing and storage, mixed lymphocyte culture, stem cell culture, cell mediated assays, and assays for the presence of cytokines. This specialty would also encompass all testing within the scope of serology/immunology, microbiology, hematology and immunohematology that pertain strictly to the processing of organ, tissue and bone marrow donors, and pre- and post-transplant patients. Clinical laboratory personnel who are licensed in the specialties of histocompatibility, serology/immunology ~~or~~ ~~and~~ immunohematology may perform all testing as being within the scope of the specialty of histocompatibility.

(16) through (19) No change.

Rulemaking Authority 483.805(4) FS. Law Implemented 483.813, 483.823, 483.825 FS. History—New 2-7-95, Amended 3-28-95, 7-12-95, 12-4-95, Formerly 59O-10.005, Amended 3-19-98, 1-28-99, 11-24-99, 2-15-01, 2-20-02, 10-30-02, 4-27-04, 2-23-06, 11-25-08, 12-30-09,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Clinical Laboratory Personnel

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Laboratory Personnel

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: December 31, 2009

DEPARTMENT OF HEALTH

Board of Nursing

RULE NO.: 64B9-4.014 RULE TITLE: Inactive Status; Reactivation

PURPOSE AND EFFECT: The Board proposes the repeal of Rule 64B9-4.014, F.A.C.

SUMMARY: This rule is being repealed.

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: 464.006, 464.012, 464.014 FS.

LAW IMPLEMENTED: 456.036(9), 464.012, 464.014 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 R. Baker, Jr., Executive Director, Board of Nursing, 4052 Bald Cypress Way, Bin #C02, Tallahassee, FL 32399

THE FULL TEXT OF THE PROPOSED RULE IS:

64B9-4.014 Inactive Status; Reactivation.

~~(1) An ARNP or CNS may apply to place his/her certificate on inactive status. The application shall be made on forms provided by the Board and shall be accompanied by an application fee for inactive status as specified in paragraph 64B9 7.001(11)(c), F.A.C. Applications for inactive status will be considered only during the biennium renewal period. If the licensee seeks to have only the certificate on inactive status, the licensee will be reissued an R.N. license, provided that said R.N. licensure has been duly renewed.~~

~~(2) When the Registered Nurse license of an ARNP or CNS is placed on inactive status, the ARNP or CNS certificate will also be placed on inactive status.~~

~~(3) No inactive certificate may be reactivated unless the applicant holds a current, active license to practice as a Registered Nurse in this State, and meets the requirements of Rule 64B9 4.002, F.A.C., if applicable.~~

~~(4) Reactivation of an inactive ARNP or CNS certificate or dual RN/ARNP or RN/CNS license/certificate shall be in the manner as provided in Rule 64B9 6.003, F.A.C.~~

~~(5) Documentation of active practice as a nurse practitioner or a clinical nurse specialist within the past 5 years or documentation of an ARNP or CNS refresher course to include both theoretical and clinical components must be submitted. A current Registered Nurse license under Sections 464.008, 464.009, F.S., is required for the clinical component of a refresher course.~~

Rulemaking Authority 464.006, 464.012, 464.014 FS. Law Implemented 456.036(9), 464.012, 464.014 FS. History—New 8-31-80, Amended 3-16-81, 6-18-85, Formerly 21O-11.28, Amended 3-19-87, 10-21-87, Formerly 21O-11.028, Amended 12-27-93, Formerly 61F7-4.014, 59S-4.014, Amended 4-5-00, 9-6-09, Repealed _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Nursing

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 3, 2010

DEPARTMENT OF HEALTH

Board of Osteopathic Medicine

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|--------------|--|
| RULE NO.: | RULE TITLE: |
| 64B15-14.005 | Standards for the Use of Controlled Substances for Treatment of Pain |

PURPOSE AND EFFECT: The proposed rule amendments clarify the rule with regard to the appropriate standards to be utilized in the use of controlled substances for the treatment of pain.

SUMMARY: The proposed rule amendments clarify the Board's rule with regard to the appropriate standards for all physicians who prescribe or dispense controlled substances for the treatment of pain.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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(1) FS.

LAW IMPLEMENTED: 459.003(3), 459.015(1)(g), (x) 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: Anthony Jusevitch, Executive Director, Board of Osteopathic Medicine/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

64B15-14.005 Standards for the Use of Controlled Substances for Treatment of Pain.

(1) through (2) No change.

(3) Guidelines. The Board has adopted the following guidelines when evaluating the use of controlled substances for pain control:

(a) Evaluation of the Patient. A complete medical history and physical examination must be conducted and documented in the medical record. The medical record shall ~~should~~ document the nature and intensity of the pain, current and past treatments for pain, underlying or coexisting diseases or conditions, the effect of the pain on physical and psychological function, and history of substance abuse. The medical record also shall ~~should~~ document the presence of one or more recognized medical indications for the use of a controlled substance.

(b) Treatment Plan. The written treatment plan ~~shall~~ ~~should~~ state objectives that will be used to determine treatment success, such as pain relief and improved physical and psychosocial function, and ~~shall~~ ~~should~~ indicate if any further diagnostic evaluations or other treatments are planned. After treatment begins, the osteopathic physician ~~shall~~ ~~should~~ adjust drug therapy, if necessary, to the individual medical needs of each patient. Other treatment modalities, including osteopathic manipulative treatment and applications, or a rehabilitation program may be necessary depending on the etiology of the pain and the extent to which the pain is associated with physical and psychosocial impairment.

(c) Informed Consent and Agreement for Treatment. The osteopathic physician ~~shall~~ ~~should~~ discuss the risks and benefits of the use of controlled substances with the patient, persons designated by the patient, or with the patient's surrogate or guardian if the patient is incompetent. The patient ~~shall~~ ~~should~~ receive prescriptions from one osteopathic physician and one pharmacy where possible. If the patient is determined to be at high risk for medication abuse or have a history of substance abuse, the osteopathic physician ~~shall~~ ~~may~~ employ the use of a written agreement between physician and patient outlining patient responsibilities, including, but not limited to:

1. through 3. No change.

(d) Periodic Review. ~~Based At reasonable intervals based~~ on the individual circumstances of the patient, the osteopathic physician ~~shall~~ ~~should~~ review the course of treatment and any new information about the etiology of the pain. Continuation or modification of therapy ~~shall~~ ~~should~~ depend on the osteopathic physician's evaluation of progress toward stated treatment objectives such as improvement in patient's pain intensity and improved physical and/or psychosocial function, i.e., ability to work, need of health care resources, activities of daily living, and quality of social life. If treatment goals are not being achieved, despite medication adjustments, the osteopathic physician ~~shall~~ ~~should~~ reevaluate the appropriateness of continued treatment. The osteopathic physician ~~shall~~ ~~should~~ monitor patient compliance in medication usage and related treatment plans.

(e) Consultation. The osteopathic physician ~~shall~~ ~~should~~ be willing to refer the patient as necessary for additional evaluation and treatment in order to achieve treatment objectives. Special attention ~~must~~ ~~should~~ be given to those pain patients who are at risk for misusing their medications and those whose living arrangements pose a risk for medication misuse or diversion. The management of pain in patients with a history of substance abuse or with a comorbid psychiatric disorder may require extra care, monitoring, documentation, and consultation with or referral to an expert in the management of such patients.

(f) Medical Records. The osteopathic physician is required to keep accurate and complete records to include, but not be limited to:

1. The complete medical history and a physical examination, including history of drug abuse or dependence, as appropriate;
2. through 7. No change.
8. Instructions and agreements; ~~and~~
9. Drug testing results; and
- ~~10.9.~~ Periodic reviews. Records must remain current, and be maintained in an accessible manner, and readily available for review, and must be in full compliance with Rule 64B15-15.004, F.A.C., and Section 459.015(1)(o), F.S.

(g) No change.

Rulemaking Specific Authority 459.005(1) FS. Law Implemented 459.003(3), 459.015(1)(g), (x) FS. History--New 3-9-00, Amended 11-14-06,_____.

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: November 5, 2010
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 24, 2010

**DEPARTMENT OF HEALTH
Board of Osteopathic Medicine**

| | |
|---------------|--|
| RULE NO.: | RULE TITLE: |
| 64B15-14.0051 | Standards of Practice for Physicians Practicing in Pain Management Clinics |

PURPOSE AND EFFECT: The proposed rule amendment is intended to require a quality assurance review of the pain management clinic once every three years as opposed to the current requirement setting forth an annual review.

SUMMARY: The current rule requires a quality assurance review of the pain management clinic every year. The proposed rule amendment will require the quality assurance review once every three years.

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 adverse impact on small business, nor will the proposed rule amendments be likely to directly or indirectly increase regulatory costs in excess of \$200,000 in the aggregate in this state within 1 year after the implementation of the rule.

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: 459.0137(4) FS.

LAW IMPLEMENTED: 459.0137 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: Anthony Jusevitch, Executive Director, Board of Osteopathic Medicine/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

64B15-14.0051 Standards of Practice for Physicians Practicing in Pain Management Clinics.

THIS RULE IS APPLICABLE TO PHYSICIANS PRACTICING IN PRIVATELY OWNED PAIN MANAGEMENT CLINICS THAT ARE REQUIRED TO BE REGISTERED PURSUANT TO SECTION 459.0137, F.S., WHO PRIMARILY ENGAGE IN THE TREATMENT OF PAIN BY PRESCRIBING OR DISPENSING CONTROLLED SUBSTANCE MEDICATIONS.

- (1) No change.
- (2) Standards of Practice in Pain Management Clinics.
- (a) through (k) No change.

(l) Quality Assurance. Each pain management clinic shall have an ongoing quality assurance program that objectively and systematically monitors and evaluates the quality and appropriateness of patient care, evaluates methods to improve patient care, identifies and corrects deficiencies within the facility, alerts the Designated Physician to identify and resolve recurring problems, and provides for opportunities to improve the facility's performance and to enhance and improve the quality of care provided to the public. The Designated Physician shall establish a quality assurance program that includes the following components:

- 1. through 4. No change.

5. The Quality Assurance program must be reviewed once every three years annually by a Florida-licensed risk manager and documentation of said ~~annual~~ review must be provided to the Department together with any corrective action plan within 30 days of the ~~annual~~ review and maintained for inspection purposes.

- (m) through (n) No change.

Rulemaking Authority 459.0137(4) FS. Law Implemented 459.0137 FS. History--New 11-8-10, 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: December 15, 2010

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 19, 2010

DEPARTMENT OF HEALTH

Division of Disease Control

| | |
|------------|---------------------------------------|
| RULE NOS.: | RULE TITLES: |
| 64D-3.029 | Diseases or Conditions to be Reported |
| 64D-3.031 | Notification by Laboratories |

PURPOSE AND EFFECT: The purpose of these changes is to remove lower-priority diseases that are currently reportable to the Department of Health by physicians, hospitals and/or laboratories from the list of reportable diseases. Cases of reportable diseases are tracked and investigated by the Department of Health for the purposes of preventing additional cases and disease outbreaks.

SUMMARY: Subject area to be addressed: Communicable disease monitoring. The following diseases will be removed from the list of reportable diseases: Encephalitis, other (non-arboviral); Meningitis, bacterial, cryptococcal and mycotic; Streptococcal disease, invasive Group A; Toxoplasmosis; Typhus fever (endemic).

The following diseases will have clarifications to their reporting requirements: Creutzfeld-Jacpb Disease; Hepatitis C, chronic; Haemophilus influenzae, meningitis and invasive disease; Lead poisoning; Rocky Mountain Spotted Fever; Vibriosis; Streptococcus pneumoniae, viral hemorrhagic fevers.

Central-line-associated bloodstream infections in hospitalized patients are made reportable by giving DOH access to reports already being made by hospitals to the US Department of Health and Human Services (HHS).

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No statement of estimated regulatory cost was prepared. The proposed amendment will lower compliance costs to regulated entities.

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: 381.0031(6) FS.

LAW IMPLEMENTED: 381.0031(6) 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: Monday, January 24, 2011, 11:00 a.m. EST

PLACE: Florida Department of Health, 2855 Merchants Row Blvd., Prather Bldg., Room 320P, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Janet J Hamilton, Surveillance and Reporting Section Administrator, Florida Department of Health, Bureau of Epidemiology, 4052 Bald Cypress Way, Bin A-12, Tallahassee, FL 32399, (850)245-4401

THE FULL TEXT OF THE PROPOSED RULE IS:

64D-3.029 Diseases or Conditions to be Reported.

(1) Diseases or conditions listed in subsection (3) below are of public health significance identified by the Department as of the date of these rules which must be reported by the practitioner, hospital, laboratory, or other individuals via telephone (with subsequent written report within 72 hours, see Rules 64D-3.030-64D-3.033, F.A.C.), facsimile, electronic data transfer, or other confidential means of communication to the County Health Department having jurisdiction for the area in which the office of the reporting practitioner, hospital, laboratory or patient’s residence is located consistent with the specific section and time frames in subsection (3) below relevant to the practitioners, hospitals and laboratories, respectively. Reporters are not prohibited from reporting diseases or conditions not listed by rule.

(2) Definitions to be used with subsection (3) below:

(a) “*Notifiable Diseases or Conditions*” – The definitions of “suspected case” and “confirmed case” for reportable diseases or conditions are set forth in “Surveillance Case Definitions for Select Reportable Diseases in Florida,” 2011 August 2008, incorporated by reference, available online at: <http://www.flrules.org/Gateway/reference.asp?No=Ref-00086>.

(b) “*Suspect Immediately*” – A notifiable condition of ~~of~~ urgent public health importance. Report without delay upon the occurrence of any of the following: Initial suspicion, receipt of

a specimen with an accompanying request for an indicative or confirmatory test, findings indicative thereof, or suspected diagnosis. Reports that cannot timely be made during the County Health Department business day shall be made to the County Health Department after-hours duty official. If unable to do so, the reporter shall contact the Florida Department of Health after hours duty official at (850)245-4401.

(c) “*Immediately*” – A notifiable condition of urgent public health importance. Report without delay upon the occurrence of any of the following: An indicative or confirmatory test, findings indicative thereof, or diagnosis. Reports that cannot timely be made during the County Health Department business day shall be made to the County Health Department after-hours duty official. If unable to do so, the reporter shall contact the Florida Department of Health after hours duty official at (850)245-4401.

(d) “*Next Business Day*” – Report before the closure of the County Health Department’s next business day following suspicion or diagnosis.

(e) “*Other*” – Report consistent with the instruction in and footnotes to subsection (3) below.

(3) Table of Notifiable Diseases or Conditions to be Reported”

| Practitioner Reporting | | | | | Laboratory Reporting | | | | | | |
|---|---------------------|-------------|-------------------|---------|--|---|---|-------------|-------------------|-------|-------|
| Notifiable Diseases or Conditions | Suspect Immediately | Timeframes | | | Other | Evidence of current or recent infection with etiological agents | Submit isolates or specimens for confirmation # 1 | Timeframes | | | Other |
| | | Immediately | Next Business Day | Other | | | | Immediately | Next Business Day | Other | |
| Any case, cluster of cases, or outbreak of <u>an infectious or non-infectious</u> a disease or condition found in the general community or any defined setting such as a hospital, school or other institution, not listed in this Rule that is of urgent public health significance. This includes <u>cases, clusters, or outbreaks spread</u> those indicative of person-to-person, by animals or vectors or from an <u>spread, zoonotic spread, the presence of an</u> environmental, food or waterborne source of exposure; <u>and</u> those that result from a deliberate act of terrorism; <u>and unexplained deaths possibly due to unidentified infectious causes.</u> | X | X | | | Detection in one or more specimens of etiological agents of a disease or condition not listed in this rule that is of urgent public health significance. This includes the identification of etiological agents that are part of <u>clusters, or outbreaks spread person-to-person, by animals or vectors or from an</u> environmental, food or waterborne source of exposure; those that result from a deliberate act of terrorism; <u>and unexplained deaths possibly due to unidentified infectious causes.</u> | | X | X | | | |
| Acquired Immune Deficiency Syndrome (AIDS) | | | | 2 Weeks | Not Applicable | | | | | | |
| Amebic Encephalitis | | X | | | <i>Naegleria fowleri, Balamuthia mandrillaris, or Acanthamoeba spp.</i> | | | X | | | |

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| Anthrax | X | X | | | Bacillus anthracis | X | X | X | | |
| Arsenic*2 | | | X | | Laboratory results as specified in the surveillance case definition for arsenic poisoning *2 | | | | X | |
| Botulism, foodborne | X | X | | | <i>Clostridium botulinum</i> or botulinum toxin | X | X | X | | |
| Botulism, infant | | | X | | <i>Clostridium botulinum</i> or botulinum toxin | X | | | | X |
| Botulism, other (includes wound and unspecified) | X | X | | | <i>Clostridium botulinum</i> or botulinum toxin | X | X | X | | |
| Brucellosis | X | X | | | <i>Brucella abortus</i> , <i>B. melitensis</i> , <i>B. suis</i> , <i>B. canis</i> | X | X | X | | |
| California serogroup virus neuroinvasive and non-neuroinvasive disease | | | X | | California encephalitis, Jamestown Canyon, Keystone, Lacrosse, snowshoe hare, trivittatus viruses | X | | | | X |
| Campylobacteriosis | | | X | | <i>Campylobacter</i> species | | | | | X |
| Cancer (except non-melanoma skin cancer, and including benign and borderline intracranial and CNS tumors) *3 | | | | 6 Months | Pathological or tissue diagnosis of cancer (except non-melanoma skin cancer and including benign and borderline intracranial and CNS tumors) | | | | | 6 Months |
| Carbon monoxide poisoning | | | X | | A volume fraction ≥ 0.09 (9%) of carboxyhemoglobin in blood | | | | | X |
| Central Line-Associated Bloodstream Infection in a hospitalized patient *4 | | | | X*4 | Not applicable | | | | | |
| CD-4 | Not Applicable | | | | CD-4 absolute count and percentage of total lymphocytes*5 4 | | | | | 3 days |
| Chancroid | | | X | | <i>Haemophilus ducreyi</i> | | | | | X |
| Chlamydia | | | X | | <i>Chlamydia trachomatis</i> | | | | | X |
| Chlamydia in pregnant women and neonates | | | X | | <i>Chlamydia trachomatis</i> | | | | | X |
| Chlamydia in children < 12 years of age*6 5 | | | X | | <i>Chlamydia trachomatis</i> | | | | | X |
| Cholera | X | X | | | <i>Vibrio cholerae</i> | X | X | X | | |
| Ciguatera fish poisoning (Ciguatera) | | | X | | Not Applicable | Not Applicable | | | | |
| Congenital anomalies*7 6 | | | | 6 Months | Not Applicable | Not Applicable | | | | |
| Conjunctivitis in neonates < 14 days old | | | X | | Not Applicable | Not Applicable | | | | |
| Creutzfeld-Jakob disease (CJD) *8 7 | | | X | | 14-3-3 and tau protein from CSF or any brain pathology suggestive of CJD*8 7 | | | | | X |
| Cryptosporidiosis | | | X | | <i>Cryptosporidium parvum</i> | | | | | X |
| Cyclosporiasis | | | X | | <i>Cyclospora cayetanensis</i> | X | | | | X |
| Dengue | | | X | | Dengue virus | X | | | | X |
| Diphtheria | X | X | | | <i>Corynebacterium diphtheriae</i> | X | X | X | | |
| Eastern equine encephalitis virus neuroinvasive and non-neuroinvasive disease | | | X | | Eastern equine encephalitis virus | X | | | | X |
| Ehrlichiosis/Anaplasmosis- | | | X | | <i>Anaplasma phagocytophilum</i> , <i>Ehrlichia chaffeensis</i> , or <i>E. ewingii</i> | X | | | | X |
| Ehrlichiosis/Anaplasmosis-undetermined or unspecified | | | X | | <i>Ehrlichia</i> or <i>Anaplasma</i> species, other | X | | | | X |
| Encephalitis, other (non-arboviral) | | | X | | Isolation from or demonstration in brain or central nervous system tissue or cerebrospinal fluid, of any pathogenic virus | | | | | X |
| Enteric disease due to <i>Escherichia coli</i> O157:H7 | | X | | | <i>Escherichia coli</i> O157:H7 | X | | | X | |
| Enteric disease due to other pathogenic <i>Escherichia coli</i> *9 8 | | X | | | <i>Escherichia coli</i> *9 8 | | | | | X |
| Giardiasis (acute) | | | X | | <i>Giardia</i> species | | | | | X |
| Glanders | X | X | | | <i>Burkholderia mallei</i> , | X | X | X | | |
| Gonorrhea | | | X | | <i>Neisseria gonorrhoeae</i> | | | | | X |
| Gonorrhea in children < 12 years of age*6 5 | | | X | | <i>Neisseria gonorrhoeae</i> | | | | | X |
| Gonorrhea in pregnant women and neonates | | | X | | <i>Neisseria gonorrhoeae</i> | | | | | X |
| Gonorrhea (Antibiotic Resistant) | | | X | | <i>Neisseria gonorrhoeae</i> *10 9 | | | | | X |
| Granuloma Inguinale | | | X | | <i>Calymmatobacterium granulomatis</i> | | | | | X |

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| <i>Haemophilus influenzae</i> , meningitis and invasive disease, in a person aged equal to or less than 5 years old | X | X | | | <i>Haemophilus influenzae</i> in a specimen from a normally sterile site, all ages *11 | X | X | X | | |
| Hansen disease (Leprosy) | | | X | | <i>Mycobacterium leprae</i> | | | | X | |
| Hantavirus infection | | X | | | Hantavirus | X | | X | | |
| Hemolytic uremic syndrome | | X | | | Not Applicable | | | | | |
| Hepatitis A*12 †0 | | X | | | Hepatitis A*12 †0 | | | X | | |
| Hepatitis C, acute symptoms of viral illness | | | X | | Hepatitis C, acute*12 †0 | | | | X | |
| Hepatitis C, chronic | Not applicable | | | | Hepatitis C, chronic *12 †0 | | | | X | |
| Hepatitis B, C, D, E and G Virus*12 †0 | | | X | | Hepatitis B, C, D, E and G Virus*12 †0 | | | | X | |
| Hepatitis B surface antigen (HBsAg)-positive in a pregnant woman or a child up to 24 months old | | | X | | Hepatitis B surface antigen (HBsAg) | | | | X | |
| Herpes simplex virus (HSV) in infants up to 60 days old with disseminated infection with involvement of liver, encephalitis and infections limited to skin, eyes and mouth*13 †† | | | X | | HSV 1 or HSV 2 by direct FA, PCR, DNA or Culture*13 †† | | | | X | |
| HSV – anogenital in children < 12 years of age*6 5*13 †† | | | X | | HSV 1 or HSV 2 by direct FA, PCR, DNA or Culture*13 †† | | | | X | |
| Human immunodeficiency virus (HIV) | | | | 2 Weeks | Repeatedly reactive enzyme immunoassay, followed by a positive confirmatory tests, (e.g. Western Blot, IFA): Positive result on any HIV virologic test (e.g. p24 AG, Nucleic Acid Test (NAT/NAAT) or viral culture). All viral load (detectable and undetectable) test results*13 †3*15 †3 | | | | | 3 days |
| Human immunodeficiency virus (HIV) Exposed Newborn – infant < 18 months of age born to a HIV infected woman | | | X | | All HIV test results (e.g., positive or negative immunoassay, positive or negative virologic tests) for those < 18 months of age | | | | | 3 days |
| Human papillomavirus (HPV) associated laryngeal papillomas or recurrent respiratory papillomatosis in children <6 years of age*6 5 | | | X | | HPV DNA | | | | X | |
| HPV – anogenital in children <12 years of age*6 5 | | | X | | HPV DNA | | | | X | |
| Human papillomavirus ONLY physicians licensed as pathologists need report as directed under Laboratory Reporting* 16 †4 → | | | X | | 1) Positive test for any high risk human papillomavirus (HPV) type (e.g., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 59, 68, etc)*17 †5 2) Abnormal cervical and anogenital cytologies consistent with “Bethesda 2001 Terminology” *18 †5 3) Abnormal histologies including*17 †5: a. cervical vaginal intraepithelial neoplasia (CIN 1, 2, or 3) b. vulvar intraepithelial neoplasia (VIN 1, 2, or 3) c. vaginal intraepithelial neoplasia (VAIN 1, 2, or 3) d. anal intraepithelial neoplasia (AIN 1, 2, or 3) | | | | X | |
| Influenza due to novel or pandemic strains | X | X | | | Isolation of influenza virus from humans of a novel or pandemic strain | X | X | X | | |
| Influenza-associated pediatric mortality in persons aged < 18 years | | X | | | Influenza virus – associated pediatric mortality in persons aged <18 years (if known) | X | | X | | |
| Lead poisoning*18 †6 | | | X | | All blood lead test results*18 †6 | | | | X | |
| Legionellosis | | | X | | <i>Legionella</i> species | | | | X | |
| Leptospirosis | | | X | | <i>Leptospira interrogans</i> | | | | X | |
| Listeriosis | | X | | | <i>Listeria monocytogenes</i> | | | X | | |
| Lyme disease | | | X | | <i>Borrelia burgdorferi</i> | | | | X | |

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| Lymphogranuloma Venereum (LGV) | | | X | <i>Chlamydia trachomatis</i> | | | | X | |
| Malaria | | | X | <i>Plasmodium falciparum, P. vivax, P. ovale, P. malariae</i> | X | | | X | |
| Measles (Rubeola) | X | X | | Measles virus*19 17 | X | X | X | | |
| Melioidosis | X | X | | <i>Burkholderia pseudomallei</i> | X | X | X | | |
| Meningitis, bacterial, cryptococcal and mycotic (other than meningococcal or <i>H. influenzae</i> or pneumococcal) | | | X | Isolation or demonstration of any bacterial or fungal species in cerebrospinal fluid | | | | X | |
| Meningococcal Disease, includes meningitis and meningococemia | X | X | | <i>Neisseria meningitidis</i> (serogroup needed) | X | X | X | | |
| Mercury poisoning | | | X | Laboratory results as specified in the surveillance case definition for mercury poisoning | | | | X | |
| Mumps | | | X | Mumps virus | | | | X | |
| Neurotoxic shellfish poisoning | | X | | Laboratory results as specified in the surveillance case definition for Neurotoxic shellfish poisoning | | | X | | |
| Pertussis | | X | | <i>Bordetella pertussis</i> | | | X | | |
| Pesticide-related illness and injury | | | X | Laboratory results as specified in the surveillance case definition for pesticide related illness and injury | | | | X | |
| Plague | X | X | | <i>Yersinia pestis</i> | X | X | X | | |
| Poliomyelitis, paralytic and non-paralytic | X | X | | Poliovirus | X | X | X | | |
| Psittacosis (Ornithosis) | | | X | <i>Chlamydophila psittaci</i> (formerly known as <i>Chlamydia psittaci</i>) | X | | | X | |
| Q Fever | | | X | <i>Coxiella burnetii</i> | X | | | X | |
| Rabies, animal | | X | | Rabiesvirus | | X | X | | |
| Rabies, human | | X | | Rabiesvirus | | X | X | | |
| Rabies, possible exposure*20 18 | X | X | | Not Applicable | | | | | |
| Ricin toxicity | X | X | | Ricin toxin (from <i>Ricinus communis</i> castor beans) | X | X | X | | |
| Rocky Mountain spotted fever and other closely related Spotted Fever Rickettsiosis | | | X | <i>Rickettsia rickettsii</i> and other <i>Rickettsia</i> spp. found to cause spotted fever rickettsiosis; including but not limited to: <i>Rickettsia aeschlimannii, R. africae, R. australis, R. conorii, R. heilongjiangensis, R. helvetica, R. honei, R. japonica, R. marmionii, R. massiliae, R. mongolotimonae, R. parkeri, R. siberica, R. slovaca</i> | X | | | X | |
| Rubella, including congenital | X | X | | Rubella virus*19 17 | X | X | X | | |
| St. Louis encephalitis (SLE) virus neuroinvasive and non-neuroinvasive disease | | | X | St. Louis encephalitis virus | X | | | X | |
| Salmonellosis | | | X | <i>Salmonella</i> species by species serogroup and serotype | | | | X | |
| Saxitoxin poisoning including Paralytic shellfish poisoning (PSP) | | | X | Saxitoxin | | | | X- | |
| Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) disease | X | X | | SARS-associated Coronavirus (SARS-CoV) | X | X | X | | |
| Shigellosis | | | X | <i>Shigella</i> species by species serogroup | | | | X | |
| Smallpox | X | X | | Variola virus (orthopox virus) | X | X | X | | |
| <i>Staphylococcus aureus</i> – community associated mortality*21 19 | | | X | <i>Staphylococcus aureus</i> - community associated mortality*22 20 | X | | | | |
| Not Applicable | | | | <i>Staphylococcus aureus</i> isolated from a normally sterile site *23 21 | | | | X | |
| <i>Staphylococcus aureus</i> with intermediate or full resistance to vancomycin (VISA, VRSA) | | X | | <i>Staphylococcus aureus</i> with intermediate or full resistance to vancomycin (VISA, VRSA); Laboratory results as specified in the surveillance case definition. *24 22 | X | | | X | |
| <i>Staphylococcus enterotoxin B</i> | | X | | <i>Staphylococcus enterotoxin B</i> | X | | | X | |
| Streptococcal disease, invasive, Group A | | | X | <i>Streptococcus pyogenes</i> , Group A, isolated from a normally sterile site (does not include throat specimens) | | | | X | |

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| <i>Streptococcus pneumoniae</i> , invasive disease | Not Applicable | | | <i>Streptococcus pneumoniae</i> isolated from a normally sterile site *23 | | | | X | |
| <i>Streptococcus pneumoniae</i> , invasive disease in children < 5 years, drug sensitive and resistant | | | X | <i>Streptococcus pneumoniae</i> isolated from a normally sterile site *25 23 | | | | X | |
| Syphilis | | | X | <i>Treponema pallidum</i> | | | | X | |
| Syphilis in pregnant women and neonates | | X | | <i>Treponema pallidum</i> | | | X | | |
| Tetanus | | | X | <i>Clostridium tetani</i> | | | | X | |
| Toxoplasmosis, acute | | | X | <i>Toxoplasma gondii</i> | | | | X | - |
| Trichinellosis (Trichinosis) | | | X | <i>Trichinella spiralis</i> | | | | X | |
| Tuberculosis (TB) *26 24 | | | X | <i>Mycobacterium tuberculosis</i> complex*26 24 | | | | X | |
| Tularemia | X | X | | <i>Francisella tularensis</i> | X | X | X | | |
| Typhoid fever | | X | | <i>Salmonella typhi</i> | X | | X | | |
| Typhus fever (epidemic or louse-borne outbreak) | X | X | | <i>Rickettsia prowazekii</i> | X | X | X | | |
| Typhus fever (endemic) | | | X | <i>Rickettsia typhi, R. felis</i> | X | | | X | |
| Vaccinia disease | X | X | | Vaccinia virus | X | X | X | | |
| Varicella (ChickenPox) *27 25 | | | X | Varicella virus | | | | X | |
| Varicella mortality | | | X | Varicella virus | | | | X | |
| Venezuelan equine encephalitis virus neuroinvasive and non-neuroinvasive | X | X | | Venezuelan equine encephalitis virus | X | X | X | | |
| Vibriosis (infections by <i>Vibrio</i> species and closely related organisms. (<i>Vibrio</i> infections, other than Cholera) | | | X | All non-cholera <i>Vibrio</i> species including, <i>V. alginolyticus</i> , <i>V. fluvialis</i> , <i>V. furnissii</i> , <i>V. mimicus</i> , <i>V. parahaemolyticus</i> , <i>V. vulnificus</i> <i>Photobacterium damsela</i> , (formerly <i>V. damsela</i>) <i>Grimontia hollisae</i> (formerly <i>V. hollisae</i>) | X | | | X | |
| Viral hemorrhagic fevers | X | X | | Ebola, Marburg, Lassa, Machupo Lujo viruses, a new world Arenavirus, or Congo-Crimean hemorrhagic fever | X | X | X | | |
| West Nile virus neuroinvasive and non-neuroinvasive disease | | | X | West Nile virus | X | | | X | |
| Western equine encephalitis virus neuroinvasive and non-neuroinvasive disease | | | X | Western equine encephalitis virus | X | | | X | |
| Yellow fever | X | X | | Yellow fever virus | X | | X | | |

*1 – Submission of isolates or specimens for confirmation:

a. Each laboratory that obtains a human isolate or a specimen from a patient shall send specimens (such as isolates, sera, slides or diagnostic preparations) to the Florida Department of Health, Bureau of Laboratories for confirmation or additional characterization of the organism.

b. Hospitals, practitioners and laboratories ~~Persons~~ submitting specimens for reportable laboratory tests to the Florida Department of Health, Bureau of Laboratories, pursuant to subsection 64D-3.003(4), F.A.C., are required to supply the laboratories with sufficient information to comply with the provisions of this section.

c. For the address of your closest regional Florida Department of Health laboratory location, contact 1(866)352-5227. This location will receive isolates

or specimens and maintain a record to indicate the date that these specimens were submitted to the laboratory.

d. Laboratories shall submit isolates or specimens to the Florida Department of Health, Bureau of Laboratories for confirmation or additional characterization of the organism for any notifiable disease as requested by the county health department director or administrator or their designee. Some additional information regarding such requests can be found in the document “Surveillance Case Definitions for Select Reportable Diseases in Florida”

e. Laboratories are not prohibited from submitting isolates or specimens from a patient for a disease or condition that is not designated in the Table of Notifiable Diseases or Conditions to be Reported in this Rule.

- *2 – Special reporting requirements for Arsenic: Test results should only be reported if the test occurred 72 hours after the patient’s consumption of seafood.
- *3 – Notification within six months of diagnosis and within six months of each treatment.
- Exceptions are located in Rule 64D-3.038, F.A.C.
- *4 – Special reporting requirements for Central Line-Associated Bloodstream Infection (CLABSI)-Reporting applies only to hospitals that choose to participate in the Centers for Medicare and Medicaid Services Hospital Inpatient Quality Reporting Program. Hospitals that participate in this program fulfill reporting requirements of this Rule by the one-time action of conferring rights to join the DOH User Group in the National Healthcare Safety Network (NHSN). This Rule does not require reporting data elements beyond those required by Centers for Medicare and Medicaid Services Hospital Inpatient Quality Reporting Program.
- *54 – All CD4s, with or without confirmed HIV infection.
- *65 – Child abuse should be considered by a practitioner upon collection of a specimen for laboratory testing in any person 12 years of age or under, excluding neonates. Reporting of a STD case to a county health department does not relieve the practitioner of their mandatory reporting responsibilities regarding child abuse pursuant to Section 39.201, F.S.
- *76 – Exceptions are located in Rule 64D-3.035, F.A.C.
- *87 – Practitioners should contact the Department of Health, Bureau of Epidemiology at (850)245-4401 to arrange appropriate autopsy and specimen collection.
- *98 – Non-O:157:H7, including enterotoxigenic, enteroinvasive, enteropathogenic, enterohemorrhagic, enteroaggregative strains and shiga toxin positive strains.
- *109 – Special reporting requirements for Antibiotic Resistant *Neisseria gonorrhoeae*:
 a. Report susceptibility test results (zone sizes for disk diffusion; MICs for E-test or agar dilution) for the following antibiotics: Azithromycin, Cefixime, Ceftriaxone, Ciprofloxacin, Erythromycin, Ofloxacin, Penicillin, Spectinomycin, and Tetracycline.
- *11 – Special reporting requirements for Haemophilus influenza: For test results associated with persons greater than 5 years old, paper reports are not required. In accordance with paragraph 64D-3.031(5)(c), F.A.C., once Electronic Laboratory Reporting is initiated with the Department, all reports should be made electronically.
- *12+0 – Special reporting requirements for Hepatitis A, B (acute and chronic), C (acute and chronic), D, E, G:
 a. Positive results should be accompanied by any hepatitis testing conducted (positive and negative results): and
 b. All serum aminotransferase levels.
- *13+1 – A 4-fold titer rise in paired sera by various serological tests confirmatory of primary infection; presence of herpes-specific IgM suggestive but not conclusive evidence of primary infection.
- *14+2 – Special requirements for STARHS (Serologic Testing Algorithm for Recent HIV Seroconversion):
 a. Each laboratory that reports a confirmed positive HIV test in persons 13 years of age and older must also report a serologic testing algorithm for recent HIV seroconversion (STARHS) test result.
 b. In lieu of producing this test result, each laboratory that reports a confirmed positive HIV test must submit a sample for additional testing using STARHS (Serologic Testing Algorithm for Recent HIV Seroconversion). The laboratory is permitted to send the remaining blood specimen or an aliquot of at least 0.5 ml to the Florida Department of Health, Bureau of Laboratories, 1217 Pearl Street, Jacksonville, Florida 32202-3926.
 c. Laboratories electing to send a blood specimen will contact the Florida Department of Health, Bureau of Laboratories at (904)791-1500 to receive specimen maintenance and shipping instructions.
 d. Nationally based laboratories with an existing contract to ship specimens directly to a STARHS laboratory designated by the National Centers for Disease Control and Prevention will not be required to send a specimen to the Florida Department of Health Laboratory.
- *15+3 – If a genotype is performed, the fasta files containing the nucleotide sequence data, including the protease and reverse transcriptase regions must be reported.
- *16+4 – Practitioners need not report, unless licensed as a pathologist.
- *17+5 – Special reporting requirements for laboratories and pathologists:
 a. Report to the Florida Department of Health, Bureau of STD Prevention and Control, 4052 Bald Cypress Way, Bin A-19, Tallahassee, Florida 32399-1716, (850)245-4303.
 b. Paper reports are not required. In accordance with paragraph 64D-3.031(5)(c), F.A.C., once Electronic Laboratory Reporting is initiated with the Department, all reports should be made electronically.
- *18+6 – Special reporting requirements for reporting blood lead tests:

- a. All blood lead tests are considered evidence of a suspected case and are to be reported to the Florida Department of Health, Bureau of Community Environmental Health, Childhood Lead Poisoning Prevention Program, 4052 Bald Cypress Way, Bin A08, Tallahassee, Florida 32399-1712, (850)245-4277. This reporting requirement pertains to: 1) laboratories and 2) practitioners that conduct on site blood lead analysis (i.e., practitioners that use portable lead care analyzers or other devices to perform blood lead analysis).
- b. All such reports must be received by the Department electronically.
- c. Results less than 10µg/dL produced by on site blood lead analysis devices (i.e., portable lead care analyzers or other portable devices used to perform blood lead analysis) must be reported within 10 business days.
- *~~1917~~ – IgM serum antibody or viral culture test orders for measles (rubeola) or rubella should be reported as suspect immediately, but not IgG results.
- *~~2018~~ – Includes a bite or other significant exposure to a human or domestic animal (including all pets and livestock) by an animal:
- a. That results in rabies prophylaxis for the person exposed, rabies testing or quarantine of the animal causing the exposure; or
- b. That is capable of transmitting herpes B viruses (includes exposures from nonhuman primates).
- *~~2119~~ – As specified in the surveillance case definition for mortality in a person infected with community associated *Staphylococcus aureus*. For *S. aureus* mortality cases, a *S. aureus* culture shall be sent to the Florida Department of Health, Bureau of Laboratories, 1217 Pearle Street, Jacksonville, Florida 32202-3926, (904)791-1500. When pneumonia was present, a suitable respiratory specimen for viral testing should be submitted if available.
- *~~2220~~ – Laboratories that have an isolate from a patient known to have died from community associated *Staphylococcus aureus* must submit isolates to Florida Department of Health, Bureau of Laboratories, 1217 Pearle Street, Jacksonville, Florida 32202-3926, (904)791-1500.
- *~~2321~~ – Special reporting requirements for *Staphylococcus aureus*:
- a. Antibiotic sensitivities must be included.
- b. Paper reports are not required. In accordance with paragraph 64D-3.031(5)(c), F.A.C., once Electronic Laboratory Reporting is initiated with the Department, all reports should be made electronically.
- *~~2422~~ – Special reporting requirements for *Staphylococcus aureus* with intermediate or full resistance to vancomycin (VISA, VRSA):
- a. Antibiotic sensitivities must be included.
- *~~2523~~ – Special reporting requirements for *Streptococcus pneumoniae*:
- a. Antibiotic sensitivities must be included.
- b. For test results associated with persons greater than 5 years old, paper reports are not required. In accordance with paragraph 64D-3.031(5)(c), F.A.C., once Electronic Laboratory Reporting is initiated with the Department, all reports should be made electronically.
- *~~2624~~ – Special reporting requirements for Tuberculosis:
- a. Test results must also be submitted by laboratories to the Department of Health, Bureau of Tuberculosis and Refugee Health, 4052 Bald Cypress Way, Bin A20, Tallahassee, Florida 32399-1717, (850)245-4350;
- b. The 15-digit spoligotype (octal code) must be reported. If the spoligotyping is not available, the isolate must be submitted to the Department of Health, Bureau of Laboratories, 1217 Pearle Street, Jacksonville, Florida 32202-3926, (904)791-1500. The Department will provide the mailing materials and pay mailing costs.
- *~~2725~~ – Special reporting requirements for Varicella (chickenpox) – Besides the information required to be reported in subsection 64D-3.030(3) F.A.C., practitioners shall also provide date of vaccination.
- Rulemaking Specific Authority 381.0011(13), 381.003(2), 381.0031(6), 384.33, 392.53(2), 392.66 FS. Law Implemented 381.0011(4), 381.003(1), 381.0031(1), (2), (6), 383.06, 384.23, 384.25, 385.202, 392.53 FS. History–New 11-20-06, Amended 11-24-08,_____.
- Editorial Note: History–Formerly 10D-3.62, 10D-3.062, and 64D-3.002.
- 64D-3.031 Notification by Laboratories.
- (1) Each person or designee who is in charge of a public, federal, private, military or hospital laboratory that performs diagnostic tests responsible for receiving the initial order to perform serologic, immunologic, microscopic, biochemical, molecular or cultural tests on specimens derived from a human body, or an animal or environmental specimen for collecting the specimen shall report or cause to be reported any laboratory test result suggestive of or diagnostic of diseases or conditions listed in the Table of Notifiable Diseases or Conditions, Rule 64D-3.029, F.A.C., as specified in that rule per this rule.
- (2) No change.

(3) To allow follow-up of laboratory findings suggestive of or diagnostic of diseases or conditions in the Table of Notifiable Diseases or Conditions, the form upon which the information will be reported shall be furnished by the laboratory that includes the following information:

The Patient's:

1. First and last name, including middle initial;
2. Address including street city, state and zip code;
3. Phone number, including area code;
4. Date of birth;
5. Sex;
6. Race;
7. Ethnicity (specify if of Hispanic descent or not of Hispanic descent);
8. Pregnancy status if applicable;
9. Social Security number;

(b) The Laboratory

1. Name, address and telephone number of laboratory performing test;
2. Type of specimen (for example stool, urine, blood, mucus, etc.);
3. Date of specimen collection;
4. Site (for example cervix, eye, etc., if applicable);
5. Date of report;
6. Type of tests performed and results, including reference range, titer when quantitative procedures are performed, and including all available results on speciating, grouping or typing of organisms;
7. Submitting provider's name, office name, address including street, city, zip code and telephone number, including area code;
8. National Provider Identification (NPI) Number.

(4) Laboratories located out of state, licensed under Part 1, Chapter 483, F.S., who collect specimens in Florida or who receive ~~an~~ the initial order for testing from a practitioner, blood bank, plasmapheresis center or other health care provider located in Florida, shall report in the same way as if the findings had been made by a laboratory located in Florida.

(5) Upon the Department's implementation of its Electronic Laboratory Reporting System (ELR) for laboratory findings suggestive of or diagnostic of diseases or conditions, reports will be submitted electronically to the Department using Health Level Seven (HL7) version 2.3.1 format or ASCII delimited flat files which reflect comparable content to HL7 version 2.3.1. utilized by the Department of Health. The CDC Implementation Guide, Health Level Seven Specifications for Electronic Laboratory-Based Reporting of Public Health Information, October 1997, using version 2.3.1 of the Health Level Seven (HL7) Standard Protocol, incorporated by reference, is available online at: <http://www.cdc.gov/nedss/ELR/HL7Spec.pdf>.

The Department's ELR System shall include:

1. The initial contact with the reporting laboratory;
2. A content review and testing of the laboratories' HL7 transmissions; and
3. The transition from testing to production for the HL7 laboratory transmissions.

(b) The Department and laboratory will agree on a date of implementation

(c) Laboratories reporting electronically through ELR and the Department shall agree to a date that the transmission of findings suggestive of or diagnostic of diseases or conditions listed in the Table of Notifiable Disease or Conditions, Rule 64D-3.029, F.A.C., electronically in HL7 version 2.3.1 format to the Department is acceptable and considered good faith reporting and the laboratory will no longer be required to submit paper forms pursuant to subsection 64D-3.031(3), F.A.C.;

(d) The Department shall ensure access to the laboratory findings suggestive of or diagnostic of disease or conditions listed in the Table of Notifiable Diseases or Conditions to authorized representatives of the department.

(6) through (8) No change.

Rulemaking Specific Authority 381.0011(7), 381.0011(13), 381.003(2), 381.0031(5), 381.0031(6), 384.33, 392.66 FS. Law Implemented 381.0011, 381.003, 381.0031, 384.25(1), 392.53(1) FS. History—New 11-20-06, Amended 11-24-08,_____.

Editorial Note: History—Formerly 10D-3.66, 10D-3.066, 64D-3.003, 64D-3.017 and 64D-3.023

NAME OF PERSON ORIGINATING PROPOSED RULE:
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DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 20, 2010

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Section III Notices of Changes, Corrections and Withdrawals

DEPARTMENT OF STATE

Division of Historical Resources

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| RULE NO.: | RULE TITLE: |
| 1A-37.001 | Use or Rental of Mission San Luis Facilities |