

**Section I**  
**Notice of Development of Proposed Rules**  
**and Negotiated Rulemaking**

**DEPARTMENT OF STATE**

**Division of Library and Information Services**

RULE NO.:       RULE TITLE:

1B-2.011       Library Grant Programs

PURPOSE AND EFFECT: The purpose of this amendment is to modify State Aid to Libraries Grant, Library Construction Grant, Library Cooperative Grant, and the Library Services and Technology Act (“LSTA”) Grant program rules.

SUBJECT AREA TO BE ADDRESSED: State Aid to Libraries Grant, Library Construction Grant, Library Cooperative Grant, and the Library Services and Technology Act (“LSTA”) Grant.  
RULEMAKING AUTHORITY: 257.14, 257.191, 257.41(2) FS.

LAW IMPLEMENTED: 257.12, 257.15, 257.16, 257.17, 257.172, 257.18, 257.191, 257.192, 257.195, 257.21, 257.22, 257.23, 257.24, 257.25, 257.40, 257.41, 257.42 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 REGISTER.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Carlos A. Rey, Florida Department of State, 500 S. Bronough St., Tallahassee, FL 32399, (850)245-6536.

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

**DEPARTMENT OF CHILDREN AND FAMILIES**

**Economic Self-Sufficiency Program**

RULE NOS.:       RULE TITLES:

65A-1.710       SSI-Related Medicaid Coverage Groups

65A-1.712       SSI-Related Medicaid Resource Eligibility Criteria

65A-1.713       SSI-Related Medicaid Income Eligibility Criteria

PURPOSE AND EFFECT: The Department intends to amend rules 65A-1.710, 65A-1.712, and 65A-1.713, F.A.C., to clarify the SSI-related Medicaid coverage groups, add an exception to the SSI resource limit, add the Program of All-Inclusive Care

for the Elderly (PACE) to several subsections, and add provisions regarding the determination of SSI-related Medicaid payments for veterans.

SUBJECT AREA TO BE ADDRESSED: SSI

RULEMAKING AUTHORITY: 409.9102, 409.919 FS.

LAW IMPLEMENTED: 409.902, 409.903, 409.904, 409.906, 409.919 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 REGISTER.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Jodi Abramowitz. Jodi can be reached at Jodi.Abramowitz@myflfamilies.com or (850)717-4470.

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

**DEPARTMENT OF CHILDREN AND FAMILIES**

**Family Safety and Preservation Program**

RULE NOS.:       RULE TITLES:

65C-41.005       Termination from Program

65C-41.006       Conflict Resolution and Appeals

PURPOSE AND EFFECT: The Department intends to amend rules 65C-41.005-.006, F.A.C., to clarify language regarding termination from the extended foster care program and to update an incorporated form.

SUBJECT AREA TO BE ADDRESSED: Extended Foster Care

RULEMAKING AUTHORITY: 39.012, 39.0121, 39.6251(10), FS.

LAW IMPLEMENTED: 39.6251, 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 REGISTER.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Jodi Abramowitz. Jodi can be reached at Jodi.Abramowitz@myflfamilies.com or (850)717-4470.

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 BUSINESS AND PROFESSIONAL REGULATION**

**Drugs, Devices and Cosmetics**

RULE NO.: RULE TITLE:

61N-2.027 Application for Permit as a Veterinary Prescription Drug Retail Establishment

PURPOSE AND EFFECT: To create a new rule to provide language and incorporate by reference, the Application for Permit as a Veterinary Prescription Drug Retail Establishment.

SUMMARY: The proposed rulemaking creates and incorporates by reference the Division of Drugs, Devices, and Cosmetics' Application for Permit as a Veterinary Prescription Drug Retail Establishment, within the text of Proposed Rule 61N-2.027, F.A.C.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:**

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein:

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: 499.01, 499.012, 499.041(3)(a), 499.05, 559.79, FS.

LAW IMPLEMENTED: 499.01(2)(k), 499.012, 499.0121, 499.04, 499.041(3)(a), 499.05, 499.051, 559.79 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Stephanie Prine, Government Operations Consultant III, Division of Drugs, Devices, and Cosmetics, Department of Business and Professional Regulation, 2601 Blair Stone Road, Tallahassee, Florida 32399-1047; (850)717-1816; stephanie.prine@myfloridalicense.com.

THE FULL TEXT OF THE PROPOSED RULE IS:

61N-2.027 Application for Permit as a Veterinary Prescription Drug Retail Establishment

A Veterinary Prescription Drug Retail Establishment Permit is required for any person that sells veterinary prescription drugs to the public pursuant to the requirements of Section 499.01(2)(k)1.-7., F.S., but does not include a pharmacy licensed under Chapter 465, F.S. Applicants wishing to obtain a Veterinary Prescription Drug Retail Establishment Permit shall submit a complete application to the Department on form DBPR-DDC-222, Application for Permit as a Veterinary Prescription Drug Retail Establishment, effective November 2019, incorporated herein by reference, <https://www.flrules.org/gateway/reference.asp?no=Ref-XXXXX>, together with the appropriate fees. A copy of Form DBPR-DDC-222, Application for Permit as a Veterinary Prescription Drug Retail Establishment, can be obtained at <https://www.myfloridalicense.com> or by contacting the Department of Business and Professional Regulation, Division of Drugs, Devices, and Cosmetics at 2601 Blair Stone Road, Tallahassee, Florida 32399-1047, (850) 717-1800. Rulemaking Authority 499.01, 499.012, 499.041(3)(a), 499.05, F.S. Law Implemented 499.01(2)(k), 499.012, 499.0121, 499.04, 499.041(3)(a), 499.05, 499.051, 559.79 F.S. History—New \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Walter Copeland, Division Director

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Halsey Beshears, Secretary

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: November 1, 2019

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: February 26, 2016

**DEPARTMENT OF HEALTH**

**Board of Nursing**

RULE NOS.: RULE TITLES:

64B9-3.002 Qualifications for Examination

64B9-3.008 Licensure by Endorsement

64B9-3.016 Multi-State License Upgrade

PURPOSE AND EFFECT: The Board proposes the amendment of the rules to revise incorporated forms in the rules.

SUMMARY: The incorporated forms will be revised.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:**

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the

statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: During discussion of the economic impact of this rule at its Board meeting, the Board, based upon the expertise and experience of its members, determined that a Statement of Estimated Regulatory Costs (SERC) was not necessary and that the rule will not require ratification by the Legislature. No person or interested party submitted additional information regarding the economic impact at that time.

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: 456.013, 464.006, 464.009 FS.

LAW IMPLEMENTED: 456.013, 456.0135, 456.036(10), 456.0635, 456.0635(2), 464.0195(3), 464.008, 464.009, 464.0095, 464.0095, art.III(3)(d), FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Joe Baker, Jr., Executive Director, Board of Nursing, 4052 Bald Cypress Way, Bin #C02, Tallahassee, Florida 32399; Joe.Baker@flhealth.gov.

THE FULL TEXT OF THE PROPOSED RULE IS:

64B9-3.002 Qualifications for Examination.

An applicant seeking certification to take the licensure examination shall submit a completed Nursing Licensure by Examination Application, form number DH-MQA 1094, 08/19 ~~12/18~~, hereby incorporated by reference, and may be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-10287>, or Nursing Licensure by Re-Examination Application, form number DH-MQA 1120, 08/19 ~~12/18~~, hereby incorporated by reference, and may be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-10288>, demonstrating that he or she meets the qualifications prescribed by the Nurse Practice Act, chapter 464, F.S. These forms are also available from the Board office or on the Board's website: <http://floridasnursing.gov>. The demonstration shall include:

(1) through (3) No change.

(4) If the applicant is a graduate of a foreign prelicensure education program not taught in English, or if English is not the applicant's native language, successful completion of one of the following:

(a) No change.

(b) A minimum overall score of 55 with a minimum speaking score of 55 ~~79%~~ on the Michigan English Test Language Assessment Battery (MET) (LAB);

(c) through (d) No change.

Rulemaking Authority 456.013, 464.006 FS. Law Implemented 456.013, 456.0135, 464.0195(3), 456.0635, 464.008, 464.0095, art.III(3)(d) FS. History—New 4-27-80, Amended 3-16-81, 8-2-81, 7-11-83, Formerly 21O-8.21, Amended 3-3-87, 12-8-87, 6-8-88, Formerly 21O-8.021, Amended 1-30-94, Formerly 61F7-3.002, Amended 9-25-96, Formerly 59S-3.002, Amended 7-27-98, 4-19-00, 5-8-01, 9-23-03, 1-29-07, 11-22-07, 12-7-10, 6-13-17, 1-19-18, 3-3-19,\_\_\_\_\_.

64B9-3.008 Licensure by Endorsement.

(1) An applicant for licensure by endorsement shall submit a completed Nursing Licensure by Endorsement Application, DH-MQA 1095, 08/19 ~~12/18~~, incorporated herein by reference, and may be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-10289>, or from the Board office or on the Board's website: <http://www.FloridasNursing.gov> and verification of licensure forms from the original state or territory in which licensure was obtained and from a state or territory in which the applicant holds an active license, and pay the required fee.

(2) through (4) No change.

Rulemaking Authority 464.006, 464.009 FS. Law Implemented 464.0195(3), 464.009, 456.013, 456.036(10), 456.0635(2) FS. History—New 4-27-80, Amended 7-12-81, 7-11-83, 7-3-84, Formerly 21O-8.26, Amended 3-3-87, 12-8-87, 8-3-89, 11-19-91, Formerly 21O-8.026, Amended 9-7-93, Formerly 61F7-3.008, Amended 1-1-96, Formerly 59S-3.008, Amended 2-18-98, 5-8-01, 9-23-03, 5-3-16, 10-9-16, 1-19-18, 3-3-19,\_\_\_\_\_.

64B9-3.016 Multi-State License Upgrade.

Registered and practical nurses currently licensed in Florida may upgrade their licenses to include multi-state practice by submitting a Multi-State License Upgrade Application, Form DH-MQA 5024, 08/19 ~~10/18~~ hereby incorporated by reference, and may be obtained from <http://www.flrules.org/Gateway/reference.asp?No=Ref-10290> or from the Board office or on the Board's website: <http://www.FloridasNursing.gov>.

Rulemaking Authority 456.013, 464.006 FS. Law Implemented 456.013, 456.0635, 464.0095 FS. History—New 1-19-18, Amended 3-3-19,\_\_\_\_\_.

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: August 9, 2019

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: October 23, 2019

**DEPARTMENT OF CHILDREN AND FAMILIES**

**Economic Self-Sufficiency Program**

RULE NOS.:	RULE TITLES:
65A-1.205	Eligibility Determination Process
65A-1.701	Definitions
65A-1.702	Special Provisions
65A-1.703	Family-Related Medicaid Coverage Groups
65A-1.704	Family-Related Medicaid Eligibility Determination Process
65A-1.705	Family-Related Medicaid General Eligibility Criteria
65A-1.707	Family-Related Medicaid Income and Resource Criteria
65A-1.708	Family-Related Medicaid Budgeting Criteria
65A-1.716	Income and Resource Criteria

PURPOSE AND EFFECT: The Department intends to amend Rules 65A-1.205, .701-.705, .707-.708, and .716, F.A.C., to revise the Family-Related Medicaid eligibility policies and procedures used to implement the Florida Family-Related Medicaid Program so that the requirements of the Affordable Care Act that govern the Florida Family-Related Medicaid coverage groups are met.

SUMMARY: The amendments will accomplish the following: (1) Revise definitions of terminology used in the Medicaid program; (2) Revise provisions related to general eligibility determinations; (3) Establish income and resource criteria for both Family-Related and SSI-Related Medicaid Programs; and (4) Set forth the Family-Related Medicaid budgeting process.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:**

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The Department used a checklist to conduct an economic analysis and determine if there is an adverse impact or regulatory costs associated with this rule that exceeds the criteria in section 120.541(2)(a), F.S. Based upon this analysis, the Department has determined that the proposed rule is not expected to require legislative ratification.

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

RULEMAKING AUTHORITY: 409.1451, 409.919, 414.095, 414.45, FS.

LAW IMPLEMENTED: 409.902, 409.903, 409.904, 409.906, 409.919, 414.045, 414.095, 414.31, 414.41, FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Jodi Abramowitz. Jodi can be reached at (850)717-4470 or Jodi.Abramowitz@myflfamilies.com.

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

Substantial rewording of 65A-1.205 follows. See Florida Administrative Code for present text.

**65A-1.205 Eligibility Determination Process**

(1) The individual completes and submits a Department application for public assistance using either the ACCESS Florida Application, CF-ES 2337, 08/2016, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, or an ACCESS Florida Web Application (only accepted electronically), CF-ES 2353, XXX, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>.

The following non-English versions of the ACCESS Florida Application are incorporated by reference: CF-ES 2337C (Chinese) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

CF-ES 2337F (French) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

CF-ES 2337H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

CF-ES 2337I (Italian) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

CF-ES 2337P (Portuguese) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

CF-ES 2337R (Russian) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

CF-ES 2337S (Spanish) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

CF-ES 2337SC (Serbo-Croatian) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>,

and CF-ES 2337V (Vietnamese) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>.

Individuals applying for Family-Related Medical Assistance only or the Children’s Health Insurance Program (CHIP) must complete and submit the Family-Related Medical Assistance Application, CF-ES 2370, 09/2015, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>.

The following non-English versions of the Family-Related Medical Assistance Application are incorporated by reference:

CF-ES 2370H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, and CF-ES 2370S (Spanish) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>. The Medical Assistance Referral form, CF-ES 2039, 08/2018, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, is submitted to initiate an Emergency Medical Assistance for Noncitizens determination and is used by providers to request a Florida Medicaid ID number assignment for newborns.

Applicants may apply for public assistance in person or by phone, mail, the internet, or fax. Individuals may also apply for Medicaid through the Federally Facilitated Marketplace (FFM).

An application for public assistance benefits must contain at least the individual's name, address, and signature to initiate the application process. An eligibility specialist determines the eligibility of each household member for public assistance. An applicant can withdraw the application at any time without affecting their right to reapply.

An application for Medicaid coverage on behalf of a child(ren) in the care of the Department is made by completing and submitting the Child In Care Medicaid Application, CF-ES 2293, 06/2013, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>.

(a) The Department must determine an applicant's eligibility for public assistance initially at application and, if the applicant is determined eligible, at periodic intervals thereafter. If an applicant is determined ineligible for Medicaid benefits based on the modified adjusted gross income (MAGI) budgeting methodology as defined in subsection 65A-1.701(45), F.A.C., with income that meets or exceeds 100% of the Federal Poverty Level (FPL), the Department will forward an electronic file to the FFM or the Children's Health Insurance Program (CHIP). It is the applicant's responsibility to keep appointments with the eligibility specialist and furnish information, documentation and verification needed to establish eligibility. If the Department schedules a telephonic appointment, it is the Department's responsibility to be available to answer the applicant's phone call at the appointed time. The Department will provide the applicant a written notice of action taken on the case including information on fair hearing rights. The eligibility specialist must provide assistance in obtaining information, documentation or verification when requested by the applicant or when assistance appears necessary.

(b) The Department must verify the Social Security Numbers (SSNs) for each applicant for public assistance benefits, except individuals applying for Medicaid who: are not eligible to receive a SSN; do not have a SSN and may only be issued an SSN for a valid non-work reason in accordance with

20 C.F.R. § 422.104; or refuse to obtain an SSN because of well-established religious objections.

(c) The Department follows time standards for processing public assistance applications which vary by public assistance program type. The time standards for processing applications for the Food Assistance Program and Temporary Cash Assistance Program are set forth in 7 C.F.R. § 273.2(g)(1) and 45 C.F.R. § 206.10(a)(3)(i) and (ii), respectively. The time standard for processing applications for Medicaid is set forth in 42 C.F.R. § 435.912 (a), (b), and (c). For Food Assistance and Temporary Cash Assistance Programs, time standards begin the date following the date the application was filed and end on the date the Department makes benefits available or mails a notice concerning eligibility, whichever is earlier.

For the Medicaid Program, the time standard begins on the date of application and ends on the date the Department mails an eligibility notice. The Department must process and determine eligibility within the following time frames:

1. Expedited Food Assistance - 7 days.
2. Food Assistance - 30 days.
3. Refugee Assistance, Medicaid not based on disability, Temporary Cash Assistance, Optional State Supplementation, Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), Qualifying Individual (QI) and Qualified Disabled and Working Individuals (WD) - 45 days.
4. Medicaid based on disability - 90 days.

All days counted after the date of application are calendar days. Applicant delay days do not count in determining the Department's compliance with the time standard. The Department uses information provided on the Screening for Expedited Medicaid Appointments form, CF-ES 2930, 04/2007, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, to expedite processing of Medicaid disability-related applications. The following non-English versions of the Screening for Expedited Medicaid Appointments form are incorporated by reference: CF-ES 2930H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>; and CF-ES 2930S (Spanish) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>. The "Are You Disabled and Applying for Medicaid?" brochure, CF/PI 165-107, 06/2008, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, describes required information for Medicaid Program eligibility determinations. The following non-English versions of the "Are You Disabled and Applying for Medicaid?" brochure are incorporated by reference: CF/PI 165-107H (Creole) is incorporated by reference and available at

<https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX;> and CF/PI 165/107S (Spanish) is incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>.(d) If the eligibility specialist determines during the interview or at any time during the processing of the application that the applicant must provide additional information or verification, or that a member of the assistance group must register for employment services, the eligibility specialist must give the applicant written notice to provide the requested information or verification, or to comply with the work registration process, allowing 10 calendar days from the date of a notice for additional information or verification or the interview date, whichever is later, to comply.

(e) For all programs, if the requested verifications are not returned within 10 calendar days from the date of written request or the interview, or 30 calendar days from the date of application, whichever is later, the application will be denied unless the applicant requests an extension prior to the due date or there is physician delay or emergency delay, as defined in subparagraphs (h)2 and (h)3 below, justifying the additional extension. If the applicant completed the interview, if required, but failed to provide the required verifications and was denied, the applicant may provide the verifications within 60 calendar days after the original date of application and reuse the application that was denied. For food assistance and temporary cash assistance, the new date of application is the date the applicant provided all required verifications.

(f) For Medicaid only applications, when the applicant must provide medical information, the due date is 30 calendar days following the date of a written request for such information or the interview date, or 60 calendar days from the date of application, whichever is later.

(g) If the due date falls on a state holiday or weekend, the due date deadline is the next business day.

(h) In accordance with 42 C.F.R. § 435.912 (e)(1) and (2), the types of unusual circumstance that might affect the application processing time for Medicaid applications include applicant delay, physician delay and emergency delay as defined below. Unusual circumstances are non-agency application processing delays, and the calendar time passing during such delay period(s) does not count as part of the application processing time standard for determining the timeliness of Medicaid eligibility decisions.

1. "Applicant delay" days are the number of calendar days attributed to the applicant that causes the eligibility decision to be made after the established time standard. Applicant delay can result from an applicant missing a scheduled appointment or failure to provide requested eligibility information, including requested medical information or requested verification. Applicant delay begins the date the applicant misses the

deadline for the required action and ends the date the applicant takes the required action.

2. "Physician delay" days are the number of calendar days attributed to the applicant's physician(s) that causes the eligibility decision to be made after the established time standard. Physician delay can result from a physician not providing requested medical evidence or from not conducting a medical examination timely. Physician delay begins 10 calendar days after the Department makes its initial request for medical evidence from the physician and ends the date the Department receives complete medical evidence that is responsive to the Department's request; or, physician delay begins 14 calendar days after the Department requests a medical examination and ends the date the Department receives the complete medical examination results.

3. "Emergency delay" days are the number of calendar days attributed to situations that are beyond the control of the Department that causes the eligibility decision to be made after the established time standard. Emergency delay can result from disasters, unexpected office closure(s), and unexpected or unscheduled computer systems inaccessibility or unavailability. Emergency delay begins the day such an event begins and ends the day the Department is able to resume application processing.

(2) In accordance with 7 C.F.R. § 273.14(b), 45 C.F.R. § 206.10(a)(9)(iii), and 42 C.F.R. § 435.916(a) or (b), and 42 C.F.R. § 435.919, the Department must redetermine eligibility at periodic intervals.

(a) A complete eligibility review is the process of reviewing all factors related to continued eligibility of the assistance group.

(b) A partial eligibility review entails a review of one or more, but not all factors of eligibility. The Department schedules partial reviews based on known facts or anticipated changes in circumstances concerning the assistance group. The partial review does not usually require an interview unless needed to obtain the necessary information. The Department will complete a review of an unanticipated change concerning the assistance group when the change is reported.

(c) The Department will make a renewal of eligibility for Medicaid without requiring information from the individual if it is possible to do so based on reliable information contained in the individual's case or other more current information available to the Department and send the individual a written notice concerning eligibility. The Department will request only the information needed to renew eligibility. If a renewal cannot be made based upon existing and available information, the Department will provide the individual with:

1. A notice, at least 30 calendar days prior to the end of the eligibility renewal date, informing them it is time to review their

eligibility for continued benefits and the options available to complete the renewal process:

2. A notice of the Department's decision concerning the renewal of eligibility; and

3. The Department will reconsider the eligibility of an individual whose case is closed due to failure to submit the renewal application or to provide requested information, if the individual meets the renewal application conditions within three months after the date of closure in accordance with 42 C.F.R. § 435.911 and 42 C.F.R. § 435.916(f).

(3) The Department conducts phone or face-to-face interviews with applicants and recipients, or their authorized or designated representatives, when required for the application or to complete the eligibility review process. The Department conducts face-to-face interviews, upon request, in the Office of Economic Self-Sufficiency Program Offices, at the applicant's or recipient's home, or at other mutually agreed upon locations. The applicant or recipient, or their authorized or designated representative, must keep the interview appointment or reschedule a missed appointment. The Department mails a notice of missed interview to food assistance households who miss an interview.

(4) If an applicant or recipient does not sign and date the application, fails to keep an appointment or reschedule with the eligibility specialist, fails to submit the required documentation or verification, or requests an extension of the due date, the Department will deny the application because it cannot establish eligibility.

(5) The Department can substantiate information provided by the applicant or recipient as part of each determination of eligibility. For any public assistance program, when there is a question about the accuracy of the information provided, the Department will ask for additional information.

(a) Substantiation establishes accuracy of information by obtaining consistent, supporting information from the individual or other third parties. The information can be obtained or provided electronically, telephonically, in writing, or by personal contact.

(b) Documentation establishes the accuracy of information by obtaining and including in the case record an official document that supports the statement(s) made by the individual.

(6) The Department conducts data exchanges with other agencies and systems to obtain relevant public assistance eligibility information on each applicant and recipient. It uses data exchanges to verify or identify social security numbers, verify the receipt of other benefits from other sources or programs, verify other eligibility information reported by the applicant or recipient, and to discover unreported relevant eligibility information. For Medicaid eligibility, information obtained from the Federal Data Services Hub (FDSH) and State Wage Information and Collection Agency (SWICA) that does

not adversely affect eligibility is considered verified upon receipt and does not require third party verification.

(a) The Department conducts data exchanges with the Social Security Administration, the Internal Revenue Service, the Florida Department of Economic Opportunity, the Florida Department of Lottery, the Federal Data Services Hub, the Florida Department of Corrections, federal and state personnel and retirement systems, other states' public assistance programs and files, and educational institutions.

(b) The Department compares information obtained through data exchanges with the information already on file. If the data exchange identifies new or different information than what is already on file, the Department conducts a partial eligibility review to determine whether benefit levels must change.

(c) The Department considers beneficiary and Supplemental Security Income (SSI) benefit data from the Social Security Administration, unemployment compensation benefits, the Department of Health, Department of Corrections, and information obtained from the Office of Vital Statistics verified upon receipt and does not require third party verification. Other information and data obtained by the Department may require third party verification before the Department will rely upon it to take adverse actions on a case. If the information provided by or on behalf of an individual is consistent with the information obtained by the Department, the Department will consider the information reasonably compatible and determine or renew eligibility, except where the law requires other procedures (such as citizenship, immigration status and identity).

(d) The Department will collect additional information as needed to determine eligibility for non-MAGI related Medicaid eligibility for:

1. Individuals whom the Department identifies based on information contained in the application as potentially eligible for non-MAGI related Medicaid coverage;

2. Individuals who request a determination of eligibility on a basis other than the MAGI rules. The Department will require individuals to provide only the information necessary to make an eligibility determination.

(7) In accordance with 42 C.F.R. § 435.907(e)(3), the Department may collect SSNs of individuals who are not requesting assistance but must provide clear notice to non-applicants that providing the SSN is voluntary as well as provide information about the Department's purpose for collecting the non-applicant's SSN.

(8) In accordance with Food Assistance Program waivers, food assistance applicants and recipients who have been interviewed, but have not returned the requested verification by the due date, can be denied prior to the 30th day. Face-to-face interviews are not required.

(9) The following additional forms, which are incorporated into this rule by reference, can be used in the eligibility determination process:

(a) Verification of Employment/Loss of Income, CF-ES 2620, 05/2010, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2620H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2620S (Spanish) is <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>;

(b) Verification of Dependent Care Expenses, CF-ES 2621, 03/2010, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2621H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2621S (Spanish) is <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>;

(c) Verification of Shelter Expenses, CF-ES 2622, 03/2010, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2622H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2622S (Spanish) is <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>;

(d) School Verification, CF-ES 2623, 10/2005, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2623H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2623S (Spanish) is <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>;

(e) Work Calendar, CF-ES 3007, 10/2005, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 3007H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 3007S (Spanish) is <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>;

(f) Designation of Beneficiary, CF-ES 990, 10/2005, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>;

(g) Medical Assistance Referral, CF-ES 2039, 08/2018, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>;

(h) Authorization to Disclose Information, CF-ES 2514, 02/2007, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2514H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2514S (Spanish) is <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>; and

(i) Financial Information Release, CF-ES 2613, 10/2005, available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>, CF-ES 2613H (Creole) is available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>. Rulemaking Authority 409.919, 414.095, 414.45 FS. Law Implemented 409.903, 409.904, 409.919, 414.045, 414.095, 414.31, 414.41 FS. History—New 4-9-92, Amended 11-22-93, 8-3-94, Formerly 10C-1.205, Amended 11-30-98, 9-27-00, 7-29-01, 9-12-04, 9-11-08, 7-1-10, 2-20-12, Amended \_\_\_\_\_.

Substantial rewording of Rule 65A-1.701 follows. See Florida Administrative Code for present text.

65A-1.701 Definitions.

As used in 65A-1.701 through 65A-1.716, F.A.C., the following terms have the following meanings unless a different meaning is given:

(1) Adoption Subsidy: A monthly payment to assist adoptive parents in caring for an adopted child who has been determined to meet the eligibility criteria of a special needs child.

(2) Adoptive Parent: A person who provides a child(ren) a permanent home through a court process, that once final, names the adoptive parent as the child's legal parent.

(3) Affordable Care Act (ACA): The Patient Protection and Affordable Care Act in accordance with 42 U.S.C. 18001 et seq.

(4) Agency for Health Care Administration (AHCA): The designated single state agency responsible for the administration of the Florida Medicaid Program.

(5) Appropriate Placement: Placement of an individual into a Medicaid-participating nursing facility that provides the type and level of care the Department determines the individual requires; or the receipt of approved Home and Community Based (HCBS) waiver services by an individual in accordance with an approved plan; or the receipt by an individual of hospice services provided by a Medicaid participating hospice provider; or by an individual in accordance with 42 U.S.C. § 1396d.

(6) Assistance Group: All individuals within the standard filing unit (SFU) who are potentially eligible for benefits. For Family-Related Medicaid eligibility, all applicants are considered to be an assistance group of one.

(7) Caretaker relative: A dependent child's relative by blood, adoption, or marriage with whom the child is living, and who is assuming primary responsibility for the child's care. The relative must be one of the following:

(a) The child's legal or biological father, mother, grandfather, grandmother, brother, sister, including those of half-blood, stepfather, stepmother, stepbrother, stepsister, uncle, aunt, first cousin, first cousin once removed, nephew, or niece; and persons of preceding generations as denoted by prefix of "grand", "great", "great-great", "great-great-great", etc.; or



(b) The present or former spouse of a person listed in (a) above, even after the marriage is terminated by death or divorce.

(8) Child: A natural, adopted or stepchild.

(9) Child-Placing Agency: A child welfare agency that is any institution, society, agency, or facility which places children in foster homes for temporary care or in prospective adoptive homes for adoption.

(10) Children's Health Insurance Program (CHIP): Premium health insurance coverage for children under age 19, as referenced in 65A-1.703, F.A.C..

(11) Code: The Internal Revenue Code of Rules and Regulations.

(12) Community Spouse: The legal spouse of a married individual who lives in the community when one spouse is in or seeking institutional care.

(13) Community Spouse Income Allowance: The portion of an institutionalized spouse's monthly income, if any, which may be protected for the community spouse's maintenance needs if agreed to by the institutionalized spouse.

(14) Community Spouse Resource Allowance: The portion of the couple's total assets which is protected for the community spouse and not considered to be available to the institutionalized spouse for purposes of determining eligibility.

(15) Coverage Group: A classification under which one or more individuals may be eligible for benefits.

(16) Department: The Department of Children and Families (DCF).

(17) Dependent: The person who depends upon another person for all or part of their support or maintenance.

(18) Developmental Disabilities Individual Budgeting (iBudget) Waiver: A Medicaid HCBS Program for persons with intellectual disabilities.

(19) Eligible Couple: A married couple with both persons meeting the criteria for Medicaid eligibility. See the definition for "spouse."

(20) Enrollment: The status of an individual who satisfies the non-financial and resource eligibility criteria for the Medically Needy Program but who is not eligible for any benefits until their share of cost is met.

(21) Excess Shelter Allowance: The amount by which the sum of a community spouse's shelter expenses and the standard utility allowance exceeds 30 percent of the Minimum Monthly Maintenance Needs Allowance (MMMNA).

(22) Ex Parte Determination: An exploration of Medicaid eligibility under another Medicaid coverage group when an individual is no longer eligible under their current Medicaid coverage group based on available information.

(23) Familial Dysautonomia (FD): A home and community-based waiver program designed specifically for individuals who are diagnosed with this genetic disorder. The waiver provides support and services that will minimize the

effects of the disease and stabilize the health of the participant to remain in a noninstitutionalized setting in the community. Participants for this waiver group must be age three through age 64.

(24) Family Size: The number of persons counted as members of an individual's SFU.

(25) Federal Benefit Rate (FBR): Income standard levels established by the federal government to determine income eligibility and payment benefits for the Supplemental Security Income (SSI) Program.

(26) Federally Facilitated Marketplace (FFM): A federally designated entity used by small businesses and individuals to find, compare, and purchase qualified health plans.

(27) Foster Care: Twenty-four-hour substitute care for children removed by the courts and placed away from their parents or guardians and for whom the State agency has placement and care responsibility. This includes, but is not limited to, placements in foster family homes, foster homes of relatives, group homes, emergency shelters, residential facilities, child care institutions, and preadoptive homes.

(28) Home and Community-Based Services Waiver Program (HCBS): A Waiver authorized under section 1915(c) of the Social Security Act. HCBS Waivers are designed to provide services for a particular targeted population based on the individual's need for care and support that will delay or prevent institutionalization.

(29) Hospice: A coverage group which provides care and support to individuals who are terminally ill (with a life expectancy of six months or less).

(30) Hospital Swing Beds: Medicaid approved beds in rural hospitals designated to provide acute hospital care or nursing facility care.

(31) Household: Individuals residing together whose presence in the home may affect the eligibility of other individuals residing in the home.

(32) iBudget Florida Developmental Disabilities (DD) Waiver: A home and community-based waiver program for individuals diagnosed with an intellectual (mental) disability. The waiver provides support and services that will assist with stabilizing the health and welfare of the individual in a noninstitutionalized setting in the community.

(33) Income: For Family-Related Medicaid Programs refer to 65A-1.707, F.A.C. For SSI-related programs refer to 20 C.F.R. § 416.1100 and 65A-1.713, F.A.C.

(34) Institutional Care Program (ICP): A program that helps to pay for the cost of care in a nursing facility and provides Medicaid coverage.

(35) Institutional Vendor Payment: The payment made by the Medicaid Program to a Medicaid licensed nursing facility for the medical care of eligible individuals.

(36) Institutionalized Individual: An inpatient in a nursing facility, hospital swing bed, hospital distinct-part skilled nursing facility, or intermediate care facility for the developmentally disabled for whom Medicaid payments are paid based on the level of care provided.

(37) Institutionalized Spouse: An inpatient or individual seeking placement in a medical or nursing facility who is legally married to a community spouse.

(38) Intermediate Care Facility for individuals with Intellectual Disabilities (ICF/ID): An institution or distinct part of an institution for treatment, care or rehabilitation of the developmentally disabled or persons with related conditions as set forth in 42 C.F.R. § 435.1010. These were formerly called "intermediate care facilities" for the mentally retarded (ICF/MR).

(39) Lawfully Residing Child: A child under the age of 19 who has a lawful immigration status or a qualified noncitizen status as provided for in the Immigration and Nationality Act.

(40) Medically Needy: Coverage which provides Medicaid eligibility for individuals whose countable income exceeds the applicable Medically Needy Income Levels (MNIL) in subsection 65A-1.716(2), F.A.C.

(41) Medically Needy Income Level (MNIL): Income in excess of the Medically Needy Income Level available to pay for medical care and services.

(42) MEDS-AD Demonstration Waiver: Medicaid coverage group for aged and disabled individuals with income at or below 88 percent of the federal poverty level.

(43) Minimum Monthly Maintenance Needs Allowance (MMMNA): The minimum monthly maintenance needs allowance recognized by the state for the community spouse of an institutionalized individual.

(44) Model Waiver: A home and community-based waiver program for individuals diagnosed with degenerate spinocerebellar disease. The waiver provides support and services that will assist with stabilizing the health and welfare of an individual to remain in a noninstitutionalized setting in the community. Participants for this waiver group are age 20 or younger.

(45) Modified Adjusted Gross Income (MAGI): The financial methodologies set forth in 42 C.F.R. § 435.603 to determine the financial eligibility of all individuals for Medicaid, except for individuals identified in 42 C.F.R. § 435.603(j).

(46) Modified Adjusted Gross Income (MAGI) Disregard: An amount that may be subtracted from countable income of the SFU as provided for in 42 C.F.R. § 435.603(d)(4) and 65A-1.707(2)F.A.C.

(47) Modified Project Aids Care: A limited coverage group for individuals diagnosed with the Human Immunodeficiency Virus (HIV) Acquired Immunodeficiency Deficiency

Syndrome (AIDS), who do not meet the criteria for enrollment in the Statewide Medicaid Managed Care Long Term Care Program and meet other program requirements.

(48) Non-Filer: An individual who is not required to file a tax return and does not expect to be claimed as a tax dependent on another person's tax return.

(49) Others Outside of the Household (OOTH): An individual not living in the home, whom the tax-filer intends to claim on their federal tax return or an individual outside the home who intends to claim an individual on their federal tax return.

(50) Parent: A natural, legal, adoptive parent, or stepparent.

(51) Patient Responsibility: The amount by which AHCA must reduce its payments to a medical institution or intermediate care facility, or reduce its payments for home and community-based services provided to an individual towards their cost of care.

(52) Presumptive Eligibility by Hospitals: An abbreviated determination of eligibility completed by a qualified hospital approved by AHCA.

(53) Program of All-Inclusive Care for the Elderly (PACE): An optional Medicaid program intended to serve the frail and elderly in the home and community. The PACE program includes a comprehensive medical and social service delivery system using an interdisciplinary team approach in an adult day health center that is supplemented by in-home and referral services in accordance with participants' needs.

(54) Qualified Designated Provider (QDP): An entity approved to conduct presumptive eligibility determinations for Medicaid for pregnant women.

(55) Qualified Disabled Trust: A trust established by a parent, grandparent, legal guardian, or court on or after October 1, 1993, or a trust created by the individual if created on or after December 13, 2016, for the sole benefit of a disabled individual under the age of 65 which may consist of the disabled individual's resources and income. The trust must provide that upon the death of the disabled individual the State shall receive all amounts remaining in the trust up to an amount equal to the total amount of medical assistance paid on behalf of the disabled individual by the Medicaid program pursuant to the state's Title XIX state plan.

(56) Qualified Hospital: A hospital that is an approved Medicaid provider under the Florida Medicaid State Plan and approved to make presumptive eligibility determinations as outlined by AHCA.

(57) Qualified Income Trust: A trust established on or after October 1, 1993, for the benefit of an individual whose income exceeds the ICP income standard and who needs institutional care or HCBS. The trust must consist of only the individual's pension, Social Security and other income. The trust must be irrevocable and provide that upon the death of that individual

the State shall receive all amounts remaining in the trust up to an amount equal to the total amount of medical assistance paid on behalf of that individual pursuant to the state's Title XIX state plan.

(58) Qualified Noncitizen: A category of noncitizens who meet at least one of the sections of the Immigration and Nationality Act, 8 U.S.C. § 1101 et seq., which allows them to receive Medicaid.

(59) Qualified Pooled Trust for the Disabled: A trust established by a disabled individual's parent, grandparent, or legal guardian, or a court on or after October 1, 1993, for the sole benefit of the disabled individual and managed by a non-profit or not-for-profit association as defined in the Internal Revenue Code. A separate account must be maintained for each disabled beneficiary. For investment and management purposes, the separate accounts may be pooled together. To the extent that any amounts remaining in the beneficiary's account upon their death are not retained by the trust, the trust must provide that upon the death of the disabled beneficiary, the State shall receive all amounts remaining in the trust up to an amount equal to the total amount of medical assistance paid on behalf of that individual pursuant to the state's Medicaid Title XIX state plan.

(60) Reasonably Compatible Income: Income reported that is consistent with information verified by an electronic data source and does not vary in a way that is meaningful for eligibility. Information is considered verified when the difference between reported income and information from electronic sources is no more than 10 percent.

(61) Resource Allowance: The amount of the couple's total countable resources which may be allocated to the community spouse of an institutionalized person.

(62) Resources: Cash or other liquid assets, or any real or personal property that an individual owns and could convert to cash to be used for their support and maintenance. The terms "resources" and "assets" are used interchangeably in this rule chapter.

(63) Retroactive Coverage: The provision that allows individuals to apply for Medicaid for any of the three months prior to the month of application for Medicaid.

(64) Share of Cost (SOC): The amount of the individual's or family's income that exceed the Medically Needy Income Level (MNIL). A SOC represents the amount of allowable medical expenses that a Medically Needy assistance group must incur each month before becoming eligible to receive Medicaid.

(65) Sibling: A natural, adopted, or step brother or sister.

(66) Spouse: An individual lawfully married to another individual under state statute, federal regulation and federal laws.

(67) Standard Disregard: Determined based on the converted data and figure of the Federal Poverty Level (FPL)

and an average of the expenses and deductions allowed for a filing unit receiving assistance under the Florida Medicaid State Plan. The amount is deducted from the total gross income to determine if the "Countable Net Income" is at or below the income limit for the coverage group based on the size of the filing unit.

(68) Standard Filing Unit (SFU): All individuals whose needs, income, and/or assets are considered in the determination of eligibility for a category of assistance.

(69) Statewide Medicaid Managed Care Long Term Care (SMMC-LTC): A program for individuals who need long term care, support and services in nursing homes, in their own homes or other community-based settings.

(70) Tax Dependent: Someone for whom a deduction may be claimed under the Internal Revenue Service (IRS) tax code.

(71) Tax-Filer: An individual required to file federal income taxes and who claims the exemption amounts cited in 42 C.F.R. § 435.603(f).

(72) Temporary Absence: A period of time for which Medicaid may continue when an otherwise eligible member is out of the home.

(73) Title XVI: The provisions of the Social Security Act that set forth Supplemental Security Income (SSI) policies and procedures. The terms "Title XVI" and "SSI" are used interchangeably in this rule chapter.

(74) Title XIX: The provisions of the Social Security Act that set forth Medicaid policies and procedures. The terms "Title XIX" and "Medicaid" are used interchangeably in this rule chapter.

Rulemaking Authority 409.919 FS. Law Implemented 409.902, 409.903, 409.904, 409.906, 409.919 FS. History—New 10-8-97, Amended 2-15-01, 4-1-03, 6-13-04, 8-10-06, Amended \_\_\_\_\_.

Substantial rewording of Rule 65A-1.702 follows. See Florida Administrative Code for present text.

65A-1.702 Special Provisions.

(1) Date of Eligibility. Eligibility for Medicaid begins the first day of a month if an individual was eligible any time during the month, except as provided below:

(a) Presumptive Eligibility for Pregnant Women (PEPW). The period of presumptive eligibility for pregnant women begins when a Qualified Designated provider, as defined in 65A-1.701, F.A.C., determines that the woman is eligible. Presumptive eligibility ends when a determination for full Medicaid is made (approved or denied), or on the last day of the month following the month the presumptive eligibility determination is made if an application for ongoing Medicaid coverage is not filed.

(b) Presumptive Eligibility by Hospitals. The period of presumptive eligibility by hospitals begins on the date the determination is made. Presumptive eligibility ends when a

determination for full Medicaid is made (approved or denied) or on the last day of the month following the month the presumptive eligibility determination is made if an application for ongoing Medicaid coverage is not filed.

(c) Presumptive Eligibility for Newborn (PEN). Eligibility for a presumptively eligible newborn begins on the date of birth and continues for one year unless one of the following occurs:

1. The child leaves the state,
2. The child dies, or
3. There is a request for voluntary closure.

(d) Medically Needy Program. Enrollment under the Medically Needy Program begins on the first day of the month the individual satisfies the non-financial and resource eligibility criteria, if applicable, but not earlier than the third month prior to the month of application.

Medicaid Eligibility under the Medically Needy Program begins on the date their incurred allowable medical expenses equal the amount of their share of cost (SOC).

(e) Emergency Medicaid for Aliens (EMA). Coverage for individuals eligible for EMA begins the first day of a covered emergency and ends the day following the last day of the emergency medical situation. A Medicaid renewal date of 12 months will be assigned. Subsequent medical emergencies require documentation, but the individual will not have to file a new application and the Department will not make a new eligibility determination during this 12 month period. Changes in the SFU circumstances will continue to affect eligibility.

(2) Processing Medicaid Applications for Supplemental Security Income (SSI) Denials.

(a) The Department will use data obtained from the Social Security Administration's (SSA) State Data Exchange (SDX) to identify individuals who have been denied SSI benefits.

(b) The Department will identify the individuals for whom the Department does not have an open Medicaid case or a pending Medicaid application at the time the SDX data is received. The Department will explore eligibility under another coverage group with information based on available information received from the SDX data. These individuals or their SSA payee will be notified in writing to contact the Department within 30 calendar days. Failure to do so without good cause, will result in the issuance of a written notice of Medicaid denial for failure to follow through in determining eligibility.

(c) Good cause means illness of the individual or a family member, an accident involving the individual or a family member, hospitalization of the individual or a family member, death of the individual or a family member, natural disasters in a relevant geographical area, being away from home or the unexpected closure of a Department's office.

(d) Those individuals whom the Department identifies as having an open Medicaid case or a pending Medicaid

application at the time the SDX data is reviewed will not be required to contact the Department, unless additional information is needed to complete the eligibility process.

(e) A determination of eligibility will be completed on the individuals who respond to written notice to contact the Department.

(3) Ex Parte Process.

(a) When a recipient's eligibility for Medicaid ends under one coverage group, the Department must evaluate their eligibility, using available information, under any other Medicaid coverage group before terminating Medicaid coverage. If additional information is required to make an ex parte determination it can be requested from the recipient. There is no requirement for the individual to contact the Department or file an application to initiate the ex parte review for continued Medicaid eligibility.

(b) All individuals who lose Medicaid eligibility under one coverage group will continue to receive Medicaid under that coverage group until the ex parte Medicaid renewal process is complete.

(c) Qualified individuals losing eligibility due to income that was calculated based on the Modified Adjusted Gross Income (MAGI) budgeting methodology will be transferred to the Children's Health Insurance Program (CHIP) or the Federally Facilitated Marketplace (FFM) for a determination of eligibility.

(4) Requirement to File for Other Benefits. As a condition of eligibility for Medicaid, the Department must require an individual to take all necessary steps to obtain any annuities, pensions, retirement, and disability benefits to which they are entitled, unless they can show good cause, as defined in subparagraph (2)(c) of this rule, for not doing so. Annuities, pensions, retirement and disability benefits include, but are not limited to, veterans' compensation and pensions, OASDI benefits, railroad retirement benefits, and unemployment compensation. After the Department notifies an individual that they must apply for the other benefit(s), if the individual fails to do so, they are not eligible for Medicaid.

(5) Child Support Enforcement Cooperation (CSE). For the purpose of establishing Medicaid eligibility, a pregnant woman is not required to cooperate with CSE as a condition of eligibility. Cooperation with CSE is also not required in Medicaid cases where benefits are only requested for a child.

(6) Re-evaluating Medicaid Adverse Actions for Individuals who do not Request a Hearing. The Department shall re-evaluate any adverse Medicaid determination upon a showing of good cause by the individual that the Department's previous determination was incorrect. This provision applies only when benefits were terminated or denied in error or the amount of a share of cost or patient responsibility was determined incorrectly. A re-evaluation must be requested

within 12 months from the effective date of the notice of adverse action.

(a) Good cause for establishing the previous determination was incorrect consists of any of the following:

1. Mathematical Error – The Department made a mechanical, computer or human error in its mathematical computations of resources or income requirements for Medicaid eligibility.

2. Records Error – The Department made an error in a Medicaid determination which caused an incorrect decision. For example, there is evidence showing that the individual's resources satisfied Florida's standard of eligibility but the application was denied on the basis of excess resources.

3. New and Material Evidence – The Department's determination was correct when made but new and material evidence that the Department did not previously consider establishes that a different decision should be made.

(b) Good cause for not requesting a hearing within the prescribed 90 day time period exists when the failure was due to circumstances beyond the individual's control or due to an unexpected closure of Department offices.

(c) Failure of the individual to provide information required by the Department to accurately determine eligibility for Medicaid where the failure was beyond the individual's control constitutes good cause for re-evaluation. However, if the individual fails to cooperate with the Department in establishing eligibility, good cause for re-evaluation does not exist.

(d) The Economic Self Sufficiency Specialist (ESSS) is responsible for the initial determination of whether good cause for re-evaluation exists. The decision must be reviewed by the ESSS's supervisor. If both the ESSS and the ESSS's supervisor determine that good cause does not exist, the next level administrator, in consultation with the Regional Program Administrator, must review the decision.

1. If a determination is made by the Regional Program Administrator that good cause does not exist, the individual will be notified of the decision and of the right to to request a fair hearing.

2. If a determination is made by the Regional Program Administrator that good cause exists and the Department discovers that an error was made in the eligibility determination, benefits must be provided retroactively as follows:

a. If an application was denied, benefits will be awarded back to the date of application, provided all other eligibility requirements are met.

b. If an ongoing case was terminated, benefits will be awarded back to the effective date of the termination, provided all other eligibility requirements are met.

3. If a determination is made by the Regional Program Administrator that good cause exists and the original determination is determined to be correct, the individual will be notified of the Department's decision. The individual has 90 calendar days from the date of notice of disposition to request a hearing. If at the end of 90 calendar days a hearing is not requested, the Department's decision is final and binding upon the individual.

(7) Assignment of Rights to Benefits. Each individual applying for or receiving Medicaid must cooperate in securing the receipt of medical support and payments from third parties that are otherwise due to the individual, unless good cause exists for not cooperating. Good cause exists when the individual previously applied for and was denied third party benefits or medical support, and the reason for denial has not changed.

(8) Retroactive Medicaid. Retroactive Medicaid is based on an approved, denied, or pending application for ongoing Medicaid benefits. For applications submitted on or after February 1, 2019, retroactive coverage only applies to applications for children under age 21 and pregnant women, including their postpartum period.

(a) Retroactive Medicaid eligibility is not effective before the third month prior to the month of application. The individual must meet all Medicaid eligibility requirements during the retroactive months. A request for retroactive Medicaid can be made for a deceased individual by a designated representative or caretaker relative, by filing a medical assistance application. However, Qualified Medicare Beneficiaries (QMB's) are not eligible for retroactive Medicaid benefits as indicated in Title XIX of the Social-Security Act § 1902(e)(8).

(b) SSI Cash Assistance Recipients. Upon SSI approval, all SSI recipients receive a system-generated notice of potential entitlement for retroactive Medicaid benefits and a reply card to be returned to the Department if the SSI recipient is interested in receiving retroactive Medicaid benefits. If the SSI recipient or their designated representative or caretaker relative contacts the Department, the Department will proceed with an eligibility determination.

(9) Re-Enrollment. In order for an individual or family to be eligible for re-enrollment in the Medically Needy program, they must:

(a) Continue to satisfy the resource criteria, if applicable;

(b) Continue to satisfy all non-financial eligibility criteria; and

(c) Provide verifications as needed. The re-enrollment period may exceed 12 months when there is a delay in the Department's processing of the re-enrollment.

(10) Limits of Coverage.

(a) Qualified Medicare Beneficiary (QMB). Under QMB coverage, individuals are eligible for Medicare cost-sharing benefits, including payment of Medicare premiums.

(b) Specified Low-Income Medicare Beneficiary (SLMB). Under SLMB coverage, individuals are eligible for payment of the Part B Medicare premium. If eligible, AHCA will pay the premium for up to three months retroactive to the month of application.

(c) Working Disabled (WD). Under WD coverage, individuals are eligible for payment of their Medicare Part A premium.

(d) Qualifying Individuals 1 (QI1). Under QI1 coverage, individuals are eligible for payment of their Medicare Part B premium. (This is coverage for individuals who would be eligible for QMB or SLMB coverage except that their income exceeds the limits for those programs.)

(11) Determining Share of Cost (SOC). The SOC is determined by deducting the appropriate Medically Needy Income Level from the individual's or family's income.

(12) Eligibility of SSI Cash Assistance Recipients. Eligible SSI recipients who are residents of Florida are automatically eligible for Medicaid pursuant to 42 C.F.R. § 435.120.

(13) Trusts.

(a) The Department applies trust provisions set forth in § 1902 of the Social Security Act.

(b) Funds transferred into a trust or other similar device established other than by a will prior to October 1, 1993, by the individual, a spouse, or a legal representative are available resources if the trust is revocable or if the trustee has any discretion over the distribution of the principal. Such funds are a transfer of a resource or income, if the trust is irrevocable and the trustee does not have discretion over distribution of the corpus, or if the individual is not the beneficiary. No penalty can be imposed when the transfer occurs beyond the 60 month look-back period. Any disbursements which can be made from the trust to the individual or to someone else on the individual's behalf shall be considered available income to the individual. Any language which limits the authority of a trustee to distribute funds from a trust, if such distribution would disqualify an individual from participation in government programs, including Medicaid, shall be disregarded.

(c) Funds transferred into a trust, other than a trust specified in 42 U.S.C. § 1396p(d)(4), by a person or entity specified in 42 U.S.C. § 1396p(d)(2) on or after October 1, 1993, shall be considered available resources or income to the individual in accordance with 42 U.S.C. § 1396p(d)(3) if there are any circumstances under which disbursement of funds from the trust could be made to the individual or to someone else for the benefit of the individual. If no disbursement can be made to the individual or to someone else on behalf of the individual, the

establishment of the trust shall be considered a transfer of resources or income.

(d) The trustee of a qualified income trust, qualified disabled trust, or a pooled trust shall provide quarterly statements to the Department which identify all deposits to and disbursements from the trust for each month during the eligibility period.

(e) Undue Hardship. A period of ineligibility shall not be imposed if the Department determines that the denial of eligibility based on counting funds in an irrevocable trust according to provisions in subparagraph 65A-1.702(13)(b), F.A.C., would create an undue hardship on the individual. Undue hardship exists when application of a trust policy would deprive an individual of food, clothing, shelter or medical care such that their life or health would be endangered. This can be caused by legal restrictions or by illegal actions of a trustee. All efforts by the individual, or their legal spouse or representative, to access the resources or income must be exhausted before this exception applies.

(14) Statewide Inpatient Psychiatric Program (SIPP). SIPP is for Medicaid eligible children under the age of 21 who require a residential level of care for treatment of a serious emotional disturbance. Those who are Medically Needy and those who are Medicare recipients are excluded from this program. Services must be received from a designated SIPP provider selected by the Agency for Health Care Administration (AHCA). SIPP providers must be licensed as a hospital or residential treatment center for children and adolescents by AHCA. This program provides an exception to provisions that residents of an institution for mental disease (IMD) are not eligible for Medicaid.

Rulemaking Authority 409.919 FS. Law Implemented 409.903, 409.904, 409.919 FS. History—New 10-8-97, Amended 4-22-98, 2-15-01, 9-24-01, 11-23-04, 5-31-06, 8-10-06, Amended \_\_\_\_\_

Substantial rewording of Rule 65A-1.703 follows. See Florida Administrative Code for present text.

65A-1.703 Family-Related Medicaid Coverage Groups. The Department determines eligibility for mandatory and optional Medicaid coverage groups for individuals, families and children described in “The Patient Protection and Affordable Care Act”, under “The Health Care and Education Reconciliation Act 2010”, Section 1931 of the Social Security Act, relevant provisions of the Medicaid Program under Title XIX of the Social Security Act, the Children’s Health Insurance Program under Title XXI of the Social Security Act and 409.903. F.S.

(1) The mandatory and optional Family-Related coverage groups are stated in each subsection of this rule that are entitled to coverage under the Florida Medicaid Program:

(a) Children under age 19.

- (b) Children age 19 to 21.
- (c) Children in foster care.
- (d) Children placed for adoption and adopted children.
- (e) Former foster care individuals up to age 26.
- (f) Parents and caretaker relatives of children.
- (g) Pregnant women.

(2) For each coverage group listed in subsection (1) above there is no asset or resource limit, and the following additional criteria must be met to qualify under the specific coverage group:

(a) Children under age 19 and ages 19 to 21, the child must have never been married or emancipated, and must meet the eligibility criteria of Title XIX of the Social Security Act and the general requirements specified in 65A-1.705, F.A.C. The countable net income for a child is based on the filing unit/family size of the coverage group. To determine eligibility for a child, if the countable net income is at or above the limit for the coverage group, the MAGI five percent disregard for the filing unit/family size is subtracted from the countable net income to determine if the child will qualify. If the countable net income for the child is below the income limit of the coverage group, the MAGI five percent disregard is not applied. Income limits are based on the coverage group, the filing unit/family size of the child and listed below, as follows:

1. The standard disregard is applied for a child under age one, children age 1-5.

2. The countable net income for the filing unit/family size of a child under age one must be less than or equal to 200 percent of the FPL.

3. The countable net income for the filing unit/family size of a child age one and up to age 19 is less than or equal to 133 percent of the FPL.

4. The countable net income for the filing unit/family size of a child age 19 to 21, must be less than or equal to the income limits included in the Florida Medicaid State Plan.

5. To determine eligibility for a pregnant woman, the filing unit shall include each anticipated unborn child as a family member including the pregnant woman.

(b) Children in Foster Care. Children for whom the Department is assuming full or partial responsibility, the child must be:

1. Placed in either a foster home, a home of a relative or nonrelative, or an approved adoptive home by a child-placing agency, or the child must be placed with a residential child care agency; or

2. In an independent living facility; or

3. In a licensed emergency shelter home; or

4. In a publicly operated community residential facility.

(c) Children placed for adoption and adopted children are:

1. Children under the age of 18 for whom there is a state adoption assistance agreement in effect, other than under Title

IV-E of the Social Security Act, between the state and an adoptive parent. In addition to the adoption assistance agreement, the state adoption agency shall determine:

a. If the child has a pre-existing special need for medical or rehabilitative care that would have precluded adoption placement without receipt of Medicaid coverage under the Florida Medicaid State Plan, and

b. Prior to execution of the adoption assistance agreement, the child:

I. Was receiving or was eligible to receive Medicaid or

II. Would have been eligible for Medicaid if the Title IV-E financial requirements specified in 42 U.S.C. §473(2)(A), had been used to determine Medicaid eligibility.

2. Children placed for adoption. Children under the age of 18 for whom there is a state adoption assistance agreement under Title IV-E of the Social Security Act in effect are deemed eligible for Medicaid even if the assistance payments are not being made. If an adoption assistance agreement is in effect, Medicaid eligibility begins when the child is placed for adoption according to state law even if an interlocutory or final judicial decree or adoption has not been issued.

(d) Former foster care individuals who are:

1. Under age 26.

2. In the Florida foster care system on their 18th birthday and receiving full Medicaid when they aged out of foster care.

3. There is no income or resource limit.

4. Not eligible and enrolled for other Medicaid mandatory coverage groups.

(e) Parents (natural or adoptive), caretaker relatives and their spouses may derive their eligibility from a child under age 18 (natural or adoptive) within the fifth degree of the relationship who has never married and is not emancipated residing with them, provided their filing unit/family size is equal to or below the income limit established in the Florida's Medicaid State Plan for the coverage group. The fifth degree of relationships includes the following individuals:

1. Brother, sisters (including step and those of half-blood),

2. Aunts, uncles, nieces and nephews,

3. First cousins (first cousins once removed), and

4. Individuals of preceding generations as denoted by prefix of "grand", "great", "great-great", "great-great-great", etc.

(f) Medicaid for pregnant women. To be eligible for this coverage group an expectant mother must meet the eligibility requirements specified in 65A-1.705, F.A.C. The following additional eligibility criteria apply:

1. The countable net income of the filing unit/family size is at or below 185 percent of the FPL.

2. When eligibility is based solely on a pregnancy, the Department will accept the individual's attestation of the number of expected births.

3. The expectant mother is not required to comply with Child Support Enforcement requirements.

4. Eligibility is extended through the month of birth and the two post-partum months regardless of changes in the income for the filing unit/family size. At the end of the extended period, an ex-parte determination must be completed and the individual notified of any changes in eligibility.

(3) Medically Needy. To be eligible for this coverage group the individual must meet the eligibility requirements prescribed in 65A-1.705, F.A.C.

(a) Included in this coverage group are the following individuals:

1. Children under age 21.

2. A parent or caretaker relative and their spouse if living together with a child up to age 19, within the fifth degree of the specified relationships:

a. Brother, sisters (including step and those of half-blood),

b. Aunts, uncles, nieces and nephews,

c. First cousins (first cousins once removed),

d. Individuals of preceding generations as denoted by prefix of "grand", "great", "great-great", "great-great-great", etc.,

e. The natural and other legally adopted children and other relatives of the adoptive parents, if they are within the specified degree, and

f. Legal spouses of any person's names in the above groups.

3. Pregnant Women, and

4. Children in foster care or receiving an adoption subsidy.

(b) The following provisions apply to Medically Needy:

1. The individual must have income at or below the respective Medically Needy Income Limit set forth in subsection 65A-1.716(2), F.A.C. If income exceeds the Medically Needy Income Limits refer to subsection 65A-1.707(9), F.A.C. Refer to paragraph 65A-1.713(1)(h), F.A.C. for additional income criteria applicable to the Medically Needy Program.

2. There is no asset or resource limit.

Rulemaking Authority 409.1451, 409.919 FS. Law Implemented 409.903, 409.904, 409.919 FS. History—New 10-8-97, Amended 9-28-98, 2-15-01, 6-13-04, Amended \_\_\_\_\_

Substantial rewording of Rule 65A-1.704 follows. See Florida Administrative Code for present text.

65A-1.704 Family-Related Medicaid Eligibility Determination Process.

(1) Public assistance staff determine eligibility for Family-Related Medicaid in accordance with 65A-1.703, 65A-1.705 and 65A-1.707, F.A.C., at the time of the initial application and annually thereafter and when a change potentially affecting eligibility is reported.

(2) The Department must make a redetermination of eligibility for Medicaid without requiring information from the individual if it is able to do so based on reliable information contained in the individual's case or other more current information available to the Department.

(a) If the Department is able to renew eligibility based on the information available, the Department will send a written notice of the eligibility determination to the individual.

(b) If the Department is unable to redetermine eligibility based on the information available, the Department will provide the individual with:

1. A notice, at least 30 calendar days prior to the end of the eligibility redetermination date, that it is time to renew their eligibility and the options available to the individual to complete the redetermination. These options are:

a. Via the internet Web site,

b. By telephone,

c. Via mail,

d. In person, or

e. By fax.

2. If the individual fails to provide the information for renewal, eligibility cannot be determined, and coverage will end. A notice of adverse action advising the individual of the Department's actions will be sent. Medicaid coverage will be reinstated back to the effective date of the closure if the individual provides the requested information within three months of the effective date of the closure and continues to be eligible.

(3) Presumptive Eligibility for Pregnant Women. Qualified Designated providers determine presumptive eligibility for pregnant women. The period of presumptive eligibility for pregnant women begins when a qualified designated provider, as defined in 65A-1.701(53), F.A.C., determines that the woman is eligible. Presumptive eligibility ends when a determination (approved or denied) for full Medicaid is made, or on the last day of the month following the month the presumptive eligibility determination was made, if an application for ongoing Medicaid coverage is not filed. Citizenship status and providing a social security number (SSN) are not required for eligibility. A pregnant woman determined presumptively eligible may receive no more than one presumptive eligibility period per pregnancy.

(4) Presumptive Eligibility by Hospitals. Pregnant women, infants and children under age 19, parents and caretaker relatives and former foster care children may receive Medicaid eligibility during a presumptive period when determined eligible by a qualified hospital, as defined in 65A-1.701(56), F.A.C. The period of presumptive eligibility begins on the date the determination is made. Presumptive eligibility ends when a determination (approved or denied) for full Medicaid is made, or on the last day of the month following the month the



presumptive eligibility determination was made, if an application for ongoing Medicaid coverage is not filed. An individual may receive no more than one presumptively eligibility determination during a 12-month period, starting with the effective date of the initial presumptive eligibility period.

Rulemaking Authority 409.919 FS. Law Implemented 409.902, 409.903, 409.904, 409.919 FS. History—New 10-8-97, Amended 2-7-01, 10-21-01, 4-1-03, 2-4-04, 6-26-08, 8-10-10, Amended \_\_\_\_\_.

Substantial rewording of Rule 65A-1.705 follows. See Florida Administrative Code for present text.

65A-1.705 Family-Related Medicaid General Eligibility Criteria.

(1) The Family-Related Medicaid technical eligibility factors.

(a) The age criteria for children is specified in 65A-1.703, F.A.C.

(b) The individual must be a resident of Florida as required by subsection 1902(a)(16) of the Social Security Act. Individuals who are physically present in Florida on a temporary basis may be considered residents of the State on a case-by-case basis if they indicate an intent to remain in Florida. A lawfully residing child under the age of 19 is considered to meet the residency requirement for Medicaid.

(c) An absence from the home of less than 30 days does not affect Medicaid eligibility. An individual is considered to be temporarily absent and may be eligible for Medicaid, under the following conditions:

1. The parent or relative continues to exercise care and control of the child during the absence

2. A definite plan exists for the absent child or parent/relative to return to the home at the end of the temporary period.

(d) The individual must be a citizen of the United States, or a qualified non-citizen, or a lawfully residing child as defined in 65A-1.701 F.A.C.

(e) The identity of each U.S. citizen, or qualified non-citizen, applying for or receiving Medicaid must be documented and verified.

(2) Standard Filing Unit (SFU)

(a) Taxpayers not claimed as a tax dependent: For individuals who expect to file a tax return for the taxable year in which an initial determination or renewal of eligibility is being made, and who do not expect to be claimed as a tax dependent by another taxpayer, the SFU consists of the taxpayer and, subject to paragraph (e) of this section, all persons whom such individual expects to claim as a tax dependent.

(b) Individuals claimed as a tax dependent: For individuals who expect to be claimed as a tax dependent by another taxpayer for the taxable year in which an initial determination

or renewal of eligibility is being made, the SFU consists of the taxpayer claiming such individual as a tax dependent, except that the SFU must be determined in accordance with paragraph (c) of this section. Such individuals include:

1. Individuals other than a spouse or a natural, adopted, or stepchild who expect to be claimed as a tax dependent by another taxpayer;

2. Individuals under age 19, or in the case of full-time students under age 21, who expect to be claimed by one parent as a tax dependent and are living with both parents but whose parents do not expect to file a joint tax return; and

3. Individuals under age 19, or in the case of full-time students under age 21, who expect to be claimed as a tax dependent by a parent not living in the home. For purposes of this subparagraph:

a. A court order or binding separation, divorce, or custody agreement establishing physical custody controls; or

b. If there is no such order or agreement or in the event of a shared custody agreement, the custodial parent is the parent with whom the child spends most nights.

(c) Individuals who neither file a tax return nor are claimed as a tax dependent. In the case of individuals who do not expect to file a federal tax return and do not expect to be claimed as a tax dependent for the taxable year in which an initial determination or renewal of eligibility is being made, or who are described in subparagraph (4)(b)(1), (4)(b)(2), or (4)(b)(3) of this section, the SFU consists of the individual and, if living with the individual:

1. The individual's spouse;

2. The individual's natural, adopted or stepchildren under age 19 or, in the case of full-time students, age 21; and

3. Individuals under age 19, or in the case of full-time students under age 21, the individual's natural, adoptive, and stepparents and natural, adoptive, and stepsiblings under age 19, or in the case of full-time students under age 21.

(d) Married couples. In the case of a married couple living together, each spouse will be included in the SFU of the other spouse, regardless of whether they expect to file a joint tax return.

(e) If the taxpayer cannot reasonably establish that another individual is a tax dependent of the taxpayer for the taxable year in which Medicaid eligibility is being determined, the inclusion of the individual in the SFU of the taxpayer is determined in accordance with paragraph (c) of this section.

Rulemaking Authority, 409.919 FS. Law Implemented, 409.903, 409.904, 409.919 FS. History—New 10-8-97, Amended 9-28-98, 4-5-99, 11-23-99, 2-15-01, 9-24-01, 4-1-03, 6-26-08, 9-16-08, Amended \_\_\_\_\_

Substantial rewording of Rule 65A-1.707 follows. See Florida Administrative Code for present text.

65A-1.707 Family-Related Medicaid Income and Resource Criteria.

(1) The Department uses the Modified Adjusted Gross Income (MAGI) based budgeting methodologies as defined in section 36B(d)(2)(B) of the Internal Revenue Code to determine the financial eligibility of individuals applying for Medicaid. Resources are not considered as part of the eligibility determination for individuals whose eligibility is determined using MAGI methodologies. MAGI methodologies will not apply to the following:

(a) Individuals whose eligibility for Medicaid does not require a determination of income by the Department, including individuals receiving Supplemental Security Income (SSI).

(b) Individuals who are age 65 or older when age is a condition of eligibility.

(c) Individuals whose eligibility is being determined on the basis of being blind or disabled.

(d) Individuals who request coverage for long-term services and supports, including nursing facility services, or individuals who request a level of care in any institution equivalent to nursing facility services, or individuals who request home and community-based services provided under a Medicaid waiver.

(e) Individuals who are being evaluated for Medicare cost sharing assistance.

(f) Individuals who are being evaluated for coverage as SSI-Related Medically Needy.

(2) Countable Net income is defined as: The sum of income counted for the assistance group based on the number of individuals and their income included in the SFU, except as provided in 42 C.F.R. § 435.603(d)(4). To determine eligibility using MAGI-based income criteria, an amount equivalent to the MAGI five percent of the Federal Poverty Level (FPL) is subtracted from the countable income of the individual based on the size of the SFU. The MAGI five percent is not applied if the countable income of the individual is at or below the income limit for the coverage group. This disregard is not applied in Medically Needy

(3) MAGI-based income is defined as: Income calculated using the same financial methodologies used to determine modified adjusted gross income as defined in section 36B(d)(2)(B) of the Internal Revenue Code, with the exceptions specified in 42 C.F.R. § 435.603(e).

(4) Household: Refer to 65A-1.705(2), F.A.C., for information on households.

(5) Income standard for infants and children under age 19: The maximum income standard for infants under age one is 200 percent countable net income of the MAGI converted FPL and the maximum income standard for children ages one through 18 is 133 percent of the FPL.

(6) Income standard for Parents and Caretaker Relatives: The maximum income standard for parents and caretaker relatives is the state's Aid to Families with Dependent Children (AFDC) payment standard in effect as of July 16, 1996, converted to a MAGI equivalent standard included in the Florida Medicaid State Plan, Approved Conversion Standards, incorporated by reference and available at <https://www.flrules.org/gateway/reference.asp?NO=Ref-XXX>.

(7) Income standard for children ages 19 and 20. The maximum income standard for children ages 19 and 20 is the state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI equivalent standard included in the Florida Medicaid State Plan, Approved Conversion Standards.

(8) Income standard for pregnant women. The maximum income standard for pregnant women is 185 percent of the FPL.

(9) Medically Needy Income Level (MNIL). The Department deducts the MNIL, as provided in 65A-1.716(2) F.A.C., from the SFU countable income to determine the amount of excess countable income Share of Cost (SOC) available to meet medical care and services each month.

(10) Exceptions to MAGI-based income referenced in 42 C.F.R. § 435.603(e).

Rulemaking Authority 409.919 FS. Law Implemented 409.903, 409.904, 409.919 FS. History—New 10-8-97, Amended 2-15-01, 11-23-04, 2-20-07, 5-6-08, 6-4-12, Amended \_\_\_\_\_

Substantial rewording of Rule 65A-1.708 follows. See Florida Administrative Code for present text.

65A-1.708 Family-Related Medicaid Budgeting Criteria.

(1) The Department uses a prospective budgeting method at the initial application and renewal of eligibility in the financial determination for Medicaid coverage for current and future months. A prospective budgeting methodology is used to determine eligibility based on the Department's best estimate of the coverage group's income and circumstances. This estimate shall be based on the Department's expectation and knowledge of current or future circumstances. When eligibility is being determined for a prior month, the actual income and circumstances for that month shall be used.

(a) Weekly income is converted to a monthly amount by using the conversion factor of 4.

(b) Biweekly income is converted to a monthly amount by using the conversion factor of 2.

(c) Semi-monthly income is converted to a monthly amount by using the conversion factor of 2.

(d) When averaging income, the four most recent weeks of income shall be used if it is representative of the individual's future earnings. A longer period of income history may be used if necessary to provide a more accurate indication of anticipated fluctuations in future income, for example self-employment in a seasonal industry, with the following exceptions:

1. Income from the most recent quarter provided to the State Wage Information Collection Agency (SWICA) within the Florida Department of Economic Opportunity (DEO) shall be used if it is representative of the individual’s future earnings.

2. In budgeting income received by an individual on a contractual basis, income received under an employment contract of less than one year will be prorated over the months it is intended to cover.

(2) There is no asset or resources test.

(3) The Department will apply the standard disregard as defined in 65A-1.701(68) F.A.C., based on the standard filing unit size to all budgets using the Family-Related Medicaid budgeting criteria except Medically Need.

(4) Budgeting for Medically Needy individuals.

(a) Determining share of cost (SOC). The Department will deduct the following amounts from an individual’s countable income to determine their SOC:

1. For individuals under age 21, parents and other caretaker relatives, and pregnant women, the Department will deduct the Medically Needy Income Level (MNIL) amounts found in 65A-1.716(2), F.A.C., for Family-Related Medicaid coverage groups.

2. For aged, blind, or disabled individuals, the Department will deduct the MNIL amounts found in 65A-1.716(2), F.A.C., SSI-Related Medicaid coverage groups.

(b) Meeting SOC. An individual is eligible (entitled to Medicaid) when their allowable medical bills are equal to or exceed the SOC. An individual who meets their share of cost must contact the Department to complete bill tracking and to be enrolled in Medicaid. When tracking medical expenses, the Department will:

1. Deduct incurred medical expenses. The Department shall deduct allowable medical expenses in chronological order, by date of service. To qualify as an allowable medical expense, it must be:

a. A recognized health insurance costs (premiums, copays and deductibles), or

b. Medical expenses that are unpaid and the payment of the expenses remains the responsibility of the individual or a member of the SFU, or

c. Medical expenses paid during the month for which bill tracking is being completed.

2. Global Prenatal Expenses. The individual has the option of using her total global prenatal bill, whether paid or unpaid, to meet her share of cost during a specified month (including month of delivery) or prorating it to cover several months during her pregnancy and not:

a. Subject to third party payment or

b. Previously used to meet SOC.

3. Medical expenses reimbursed by a state or local government not funded in full by federal funds, excluding Medicaid program payments, are allowable deductions.

4. Allowable medical expenses, such as medical services and personal care services in the home, provided or prescribed by a recognized member of the medical community.

Rulemaking Authority 409.919 FS. Law Implemented 409.903, 409.904, 409.919 FS. History—New 10-8-97, Amended 2-15-01, 10-16-07, Amended \_\_\_\_\_

Substantial rewording of 65A-1.716 follows. See Florida Administrative Code for present text.

65A-1.716 Income and Resource Criteria.

(1) The monthly federal poverty level figures based on the family size are as follows:

Family Size	88% of Poverty Level	100% of Poverty Level	120% of Poverty level	133% of Poverty Level	135% of Poverty Level	185% of Poverty Level	200% of Poverty Level
1	\$916	\$1,041	\$1,249	\$1,385	\$1,406	\$1,926	\$2,082
2	\$1,241	\$1,410	\$1,691	\$1,875	\$1,903	\$2,607	\$2,819
3		\$1,778		\$2,365		\$3,289	\$3,555
4		\$2,145		\$2,854		\$3,970	\$4,292
5		\$2,515		\$3,344		\$4,652	\$5,029
6		\$2,883		\$3,834		\$5,333	\$5,765
7		\$3,251		\$4,324		\$6,015	\$6,502
8		\$3,620		\$4,814		\$6,696	\$7,239
9		\$3,988		\$5,304		\$7,377	\$7,975
10		\$4,356		\$5,794		\$8,059	\$8,712
11		\$4,725		\$6,284		\$8,740	\$9,449
12		\$5,093		\$6,771		\$9,422	\$10,185
For each addtl person		\$369		\$490		\$682	\$737

(2) Monthly income levels for Family-Related and SSI (Supplemental Security Income)-Related Medically Needy Income Levels (MNIL) are by family size as follows:

Family Size	Monthly Income Level	Family-Related MNIL	SSI-Related MNIL
1	\$180	\$289	\$180
2	\$241	\$387	\$241
3	\$303	\$486	
4	\$364	\$585	
5	\$426	\$684	
6	\$487	\$783	
7	\$549	\$882	
8	\$610	\$981	
9	\$671	1079	
10	\$733	1179	
Add for each addtl. person	\$62	\$100	

Exception: In determining eligibility for a pregnant woman, the income limits for Monthly Income Level and

MNIL used shall be increased to the higher limit corresponding to the applicant's actual family size. Family size shall include each anticipated unborn child as a family member.

(3) The resource limits for the Medically Needy program are as follows:

- (a) Family-Related Medicaid: \$0
- (b) SSI-Related Medicaid:
  - 1. \$5,000 per individual; and
  - 2. \$6,000 per couple

<u>Family Size</u>	<u>Monthly Asset Level</u>
<u>1</u>	<u>\$5,000</u>
<u>2</u>	<u>\$6,000</u>
<u>3</u>	<u>\$6,000</u>
<u>4</u>	<u>\$6,500</u>
<u>5</u>	<u>\$7,000</u>
<u>6</u>	<u>\$7,500</u>
<u>7</u>	<u>\$8,000</u>
<u>8</u>	<u>\$8,500</u>
<u>9</u>	<u>\$9,000</u>
<u>10</u>	<u>\$9,500</u>

For each additional person add \$500.

Exception: In determining eligibility for a pregnant woman, the resource limit used shall be increased to the higher limit corresponding to the applicant's actual family size, including each anticipated unborn child as a family member.

(4) The maximum resource limit is \$2,000 for those individuals:

(a) Whose Medicaid coverage is based on payment standard income criteria. Refer to subsection 65A-1.716(2), F.A.C.; or

(b) Are children living with their parent(s) and who, as children, would qualify for cash assistance except for their age. The maximum resource limit of \$2,000 also applies to those coverage groups indicated in 65A-1.703, F.A.C. However, there is no asset limit for the coverage groups specified in paragraphs 65A-1.703(3) through (5), F.A.C.

(5) The SSI-Related Medicaid Program Standards:

(a) SSI (42 U.S.C. §§ 1382 – 1383c) Resource Limits:

- 1. \$2000 per individual.
- 2. \$3000 per eligible couple, or per eligible individual with an ineligible spouse who is living together.

(b) The income limit which applies to an individual in Home and Community-Based Services (HCBS) waiver programs, Institutional Care Programs (ICP), and hospice is 300 percent of the Federal Benefit Rate (FBR) for an individual.

(c) Spousal Impoverishment Standards.

1. Resource Allocation. The amount of the couple's total countable resources which may be allocated to the community

spouse of an institutionalized person is equal to the maximum allowed by 42 U.S.C. § 1396r-5(f)(2)(A).

2. Minimum Monthly Maintenance Needs Allowance (MMMNA). The minimum monthly maintenance needs allowance the Department recognizes for a community spouse is equal to 150 percent of the federal poverty level (FPL) for a family of two as set forth in 42 U.S.C. § 1396r-5(d)(3)(A)(i) and (ii).

3. Excess Shelter Allowance. The community spouse's shelter expenses must exceed 30 percent of the MMMNA to be considered excess shelter expenses to be included in the maximum income allowance:  $MMMNA \times 30\% = \text{Excess Shelter Allowance}$ , as defined in 42 U.S.C. § 1396r-5(d)(3)(A)(ii). This standard changes July 1 of each calendar year.

4. Food Assistance Program Standard Utility Allowance. The amount specified in subsection 65A-1.603(2), F.A.C.

5. Cap of Community Spouse Needs Allowance. The MMMNA plus excess shelter allowance cannot exceed the maximum amount allowed under 42 U.S.C. § 1396r-5(d)(3)(A)(C). This needs allowance changes January 1 of each year.

(d) The average monthly private pay nursing facility rate is \$9,485.

(e) The following life expectancy tables are compiled from information published by the Office of the Chief Actuary of the Social Security Administration:

**FEMALE LIFE EXPECTANCY TABLE**

<u>Age</u>	<u>Life Expectancy</u>	<u>Age</u>	<u>Life Expectancy</u>	<u>Age</u>	<u>Life Expectancy</u>
<u>0</u>	<u>80.99</u>	<u>40</u>	<u>42.50</u>	<u>80</u>	<u>9.74</u>
<u>1</u>	<u>80.43</u>	<u>41</u>	<u>41.56</u>	<u>81</u>	<u>9.15</u>
<u>2</u>	<u>79.46</u>	<u>42</u>	<u>40.62</u>	<u>82</u>	<u>8.58</u>
<u>3</u>	<u>78.48</u>	<u>43</u>	<u>39.69</u>	<u>83</u>	<u>8.04</u>
<u>4</u>	<u>77.49</u>	<u>44</u>	<u>38.76</u>	<u>84</u>	<u>7.51</u>
<u>5</u>	<u>76.50</u>	<u>45</u>	<u>37.83</u>	<u>85</u>	<u>7.01</u>
<u>6</u>	<u>75.51</u>	<u>46</u>	<u>36.90</u>	<u>86</u>	<u>6.53</u>
<u>7</u>	<u>74.52</u>	<u>47</u>	<u>35.98</u>	<u>87</u>	<u>6.07</u>
<u>8</u>	<u>73.53</u>	<u>48</u>	<u>35.07</u>	<u>88</u>	<u>5.64</u>
<u>9</u>	<u>72.54</u>	<u>49</u>	<u>34.16</u>	<u>89</u>	<u>5.23</u>
<u>10</u>	<u>71.54</u>	<u>50</u>	<u>33.26</u>	<u>90</u>	<u>4.85</u>
<u>11</u>	<u>70.55</u>	<u>51</u>	<u>32.36</u>	<u>91</u>	<u>4.50</u>
<u>12</u>	<u>69.56</u>	<u>52</u>	<u>31.48</u>	<u>92</u>	<u>4.18</u>
<u>13</u>	<u>68.56</u>	<u>53</u>	<u>30.59</u>	<u>93</u>	<u>3.88</u>
<u>14</u>	<u>67.57</u>	<u>54</u>	<u>29.72</u>	<u>94</u>	<u>3.67</u>
<u>15</u>	<u>66.58</u>	<u>55</u>	<u>28.85</u>	<u>95</u>	<u>3.37</u>
<u>16</u>	<u>65.60</u>	<u>56</u>	<u>27.99</u>	<u>96</u>	<u>3.16</u>
<u>17</u>	<u>64.62</u>	<u>57</u>	<u>27.13</u>	<u>97</u>	<u>2.96</u>
<u>18</u>	<u>63.63</u>	<u>58</u>	<u>26.28</u>	<u>98</u>	<u>2.79</u>

<u>19</u>	<u>62.66</u>	<u>59</u>	<u>25.44</u>	<u>99</u>	<u>2.63</u>
<u>20</u>	<u>61.68</u>	<u>60</u>	<u>24.60</u>	<u>100</u>	<u>2.48</u>
<u>21</u>	<u>60.71</u>	<u>61</u>	<u>23.76</u>	<u>101</u>	<u>2.33</u>
<u>22</u>	<u>59.73</u>	<u>62</u>	<u>22.94</u>	<u>102</u>	<u>2.19</u>
<u>23</u>	<u>58.73</u>	<u>63</u>	<u>22.12</u>	<u>103</u>	<u>2.06</u>
<u>24</u>	<u>57.80</u>	<u>64</u>	<u>21.30</u>	<u>104</u>	<u>1.93</u>
<u>25</u>	<u>56.83</u>	<u>65</u>	<u>20.49</u>	<u>105</u>	<u>1.81</u>
<u>26</u>	<u>55.86</u>	<u>66</u>	<u>19.69</u>	<u>106</u>	<u>1.69</u>
<u>27</u>	<u>54.90</u>	<u>67</u>	<u>18.89</u>	<u>107</u>	<u>1.58</u>
<u>28</u>	<u>53.93</u>	<u>68</u>	<u>18.11</u>	<u>108</u>	<u>1.47</u>
<u>29</u>	<u>52.97</u>	<u>69</u>	<u>17.33</u>	<u>109</u>	<u>1.37</u>
<u>30</u>	<u>52.01</u>	<u>70</u>	<u>16.57</u>	<u>110</u>	<u>1.27</u>
<u>31</u>	<u>51.05</u>	<u>71</u>	<u>15.82</u>	<u>111</u>	<u>1.18</u>
<u>32</u>	<u>50.09</u>	<u>72</u>	<u>15.09</u>	<u>112</u>	<u>1.09</u>
<u>33</u>	<u>49.14</u>	<u>73</u>	<u>14.37</u>	<u>113</u>	<u>1.01</u>
<u>34</u>	<u>48.19</u>	<u>74</u>	<u>13.66</u>	<u>114</u>	<u>0.93</u>
<u>35</u>	<u>47.23</u>	<u>75</u>	<u>12.97</u>	<u>115</u>	<u>0.86</u>
<u>36</u>	<u>46.28</u>	<u>76</u>	<u>12.29</u>	<u>116</u>	<u>0.79</u>
<u>37</u>	<u>45.34</u>	<u>77</u>	<u>11.62</u>	<u>117</u>	<u>0.73</u>
<u>38</u>	<u>44.39</u>	<u>78</u>	<u>10.98</u>	<u>118</u>	<u>0.67</u>
<u>39</u>	<u>43.45</u>	<u>79</u>	<u>10.35</u>	<u>119</u>	<u>0.62</u>

<u>21</u>	<u>55.98</u>	<u>61</u>	<u>20.85</u>	<u>101</u>	<u>2.02</u>
<u>22</u>	<u>55.05</u>	<u>62</u>	<u>20.11</u>	<u>102</u>	<u>1.91</u>
<u>23</u>	<u>54.13</u>	<u>63</u>	<u>19.37</u>	<u>103</u>	<u>1.81</u>
<u>24</u>	<u>53.22</u>	<u>64</u>	<u>18.65</u>	<u>104</u>	<u>1.71</u>
<u>25</u>	<u>52.30</u>	<u>65</u>	<u>17.92</u>	<u>105</u>	<u>1.61</u>
<u>26</u>	<u>51.38</u>	<u>66</u>	<u>17.20</u>	<u>106</u>	<u>1.52</u>
<u>27</u>	<u>50.47</u>	<u>67</u>	<u>16.49</u>	<u>107</u>	<u>1.43</u>
<u>28</u>	<u>49.55</u>	<u>68</u>	<u>15.78</u>	<u>108</u>	<u>1.35</u>
<u>29</u>	<u>48.63</u>	<u>69</u>	<u>15.09</u>	<u>109</u>	<u>1.27</u>
<u>30</u>	<u>47.72</u>	<u>70</u>	<u>14.40</u>	<u>110</u>	<u>1.19</u>
<u>31</u>	<u>46.80</u>	<u>71</u>	<u>13.73</u>	<u>111</u>	<u>1.11</u>
<u>32</u>	<u>45.89</u>	<u>72</u>	<u>13.07</u>	<u>112</u>	<u>1.04</u>
<u>33</u>	<u>44.97</u>	<u>73</u>	<u>12.43</u>	<u>113</u>	<u>0.97</u>
<u>34</u>	<u>44.06</u>	<u>74</u>	<u>11.80</u>	<u>114</u>	<u>0.91</u>
<u>35</u>	<u>43.15</u>	<u>75</u>	<u>11.18</u>	<u>115</u>	<u>0.84</u>
<u>36</u>	<u>42.23</u>	<u>76</u>	<u>10.58</u>	<u>116</u>	<u>0.78</u>
<u>37</u>	<u>41.32</u>	<u>77</u>	<u>10.00</u>	<u>117</u>	<u>0.73</u>
<u>38</u>	<u>40.41</u>	<u>78</u>	<u>9.43</u>	<u>118</u>	<u>0.67</u>
<u>39</u>	<u>39.50</u>	<u>79</u>	<u>8.88</u>	<u>119</u>	<u>0.62</u>

**MALE LIFE EXPECTANCY TABLE**

<u>Age</u>	<u>Life Expectancy</u>	<u>Age</u>	<u>Life Expectancy</u>	<u>Age</u>	<u>Life Expectancy</u>
<u>0</u>	<u>76.04</u>	<u>40</u>	<u>38.59</u>	<u>80</u>	<u>8.34</u>
<u>1</u>	<u>75.52</u>	<u>41</u>	<u>37.69</u>	<u>81</u>	<u>7.82</u>
<u>2</u>	<u>74.55</u>	<u>42</u>	<u>36.78</u>	<u>82</u>	<u>7.32</u>
<u>3</u>	<u>73.58</u>	<u>43</u>	<u>35.88</u>	<u>83</u>	<u>6.84</u>
<u>4</u>	<u>72.59</u>	<u>44</u>	<u>34.98</u>	<u>84</u>	<u>6.38</u>
<u>5</u>	<u>71.60</u>	<u>45</u>	<u>34.08</u>	<u>85</u>	<u>5.69</u>
<u>6</u>	<u>70.62</u>	<u>46</u>	<u>33.19</u>	<u>86</u>	<u>5.52</u>
<u>7</u>	<u>69.63</u>	<u>47</u>	<u>32.30</u>	<u>87</u>	<u>5.12</u>
<u>8</u>	<u>68.64</u>	<u>48</u>	<u>31.43</u>	<u>88</u>	<u>4.75</u>
<u>9</u>	<u>67.64</u>	<u>49</u>	<u>30.55</u>	<u>89</u>	<u>4.40</u>
<u>10</u>	<u>66.65</u>	<u>50</u>	<u>29.69</u>	<u>90</u>	<u>4.08</u>
<u>11</u>	<u>65.66</u>	<u>51</u>	<u>28.84</u>	<u>91</u>	<u>3.78</u>
<u>12</u>	<u>64.66</u>	<u>52</u>	<u>27.99</u>	<u>92</u>	<u>3.50</u>
<u>13</u>	<u>63.67</u>	<u>53</u>	<u>27.16</u>	<u>93</u>	<u>3.25</u>
<u>14</u>	<u>62.68</u>	<u>54</u>	<u>26.34</u>	<u>94</u>	<u>3.03</u>
<u>15</u>	<u>61.70</u>	<u>55</u>	<u>25.52</u>	<u>95</u>	<u>2.83</u>
<u>16</u>	<u>60.73</u>	<u>56</u>	<u>24.72</u>	<u>96</u>	<u>2.66</u>
<u>17</u>	<u>59.76</u>	<u>57</u>	<u>23.93</u>	<u>97</u>	<u>2.51</u>
<u>18</u>	<u>58.81</u>	<u>58</u>	<u>23.15</u>	<u>98</u>	<u>2.37</u>
<u>19</u>	<u>57.86</u>	<u>59</u>	<u>22.37</u>	<u>99</u>	<u>2.25</u>
<u>20</u>	<u>56.91</u>	<u>60</u>	<u>21.61</u>	<u>100</u>	<u>2.13</u>

Rulemaking Authority 409.919 FS. Law Implemented 409.902, 409.903, 409.904, 409.906, 409.919 FS. History—New 10-8-97, Amended 12-9-99, 2-15-01, 11-25-01, 7-28-02, 4-1-03, 9-10-03, 8-30-04, 8-10-06, 4-15-12, 10-16-12, 11-4-12, 9-18-13, Amended .

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Suzann Fauci  
NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Chad Poppel  
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: November 4, 2019  
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: December 13, 2018

**Section III**  
**Notice of Changes, Corrections and Withdrawals**

**AGENCY FOR HEALTH CARE ADMINISTRATION**

**Medicaid**

RULE NO.: 59G-4.197      RULE TITLE: Medical Foster Care Services  
NOTICE OF CORRECTION

Notice is hereby given that the following correction has been made to the proposed rule in Vol. 45 No. 209, October 25, 2019 issue of the Florida Administrative Register.

The summary of statement of estimated regulatory costs now includes: The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: A checklist was prepared by the Agency to determine the need for a SERC. Based on this information at the time of the analysis and pursuant to section 120.541, Florida Statutes, the rule will not require legislative ratification.

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**Board of Professional Engineers**

RULE NOS.: RULE TITLES:

61G15-20.0010 Application for Licensure as Professional Engineer

61G15-20.0015 Application for Certification as Engineering Intern

**NOTICE OF CHANGE**

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 45 No. 192, October 2, 2019 issue of the Florida Administrative Register.

The changes are in response to written comments submitted by the staff of the Joint Administrative Procedures Committee and discussion and subsequent vote by the board at a public meeting held November 6, 2019. The changes are as follows:

61G15-20.0010 Application for Licensure as Professional Engineer.

(1) Any person desiring licensure as a professional engineer in Florida shall submit an application to the Board. The instructions and application Form FBPE/002 (09/19), entitled, "Application for Licensure as Professional Engineer," is hereby incorporated by reference, copies of which may be obtained from the Board office at 2639 North Monroe Street, Suite B-112, Tallahassee, Florida 32303; from the Board's website at <http://www.fbpe.org/licensure/application-process> or at <https://www.flrules.org/Gateway/reference.asp?No=Ref->. The Board shall certify as eligible for licensure only those applicants who have completed the application form, remitted the application and examination fee(s) required by chapter 61G15-24, F.A.C., and who have demonstrated to the Board that they:

(a) through (c) No change.

(d) Have passed the Laws and Rules Study Guide and Questionnaire as required by Rule 61G15-20.0016, F.A.C.

(2) If an applicant for licensure by examination satisfies the conditions found in section 471.013(1)(d), F.S. or an applicant for licensure by endorsement satisfies the conditions found in section 471.015(5)(a), F.S., then the Board shall deem

that the applicant has passed an examination substantially equivalent to Part I, fundamentals of the engineering examination. If an applicant for licensure by endorsement satisfies the conditions found in section 471.015(5)(b), F.S., then the Board shall deem that the applicant has passed an examination substantially equivalent to Part I, fundamentals, and Part II, principles and practice, of the engineering examination.

(3) The Board shall deem that an applicant for licensure, who has an engineering or engineering technology degree from a program that is not EAC/ABET accredited, has demonstrated substantial equivalency to an EAC/ABET or ETAC/ABET accredited engineering program, as required by rules 61G15-20.007 and 61G15-20.008, F.A.C., when such applicant has held a valid professional engineer's license in another state for 15 years and has had 20 years of professional-level engineering experience, to include the active practice of engineering for at least 3 of the last ~~to~~ 5 years.

(4) through (5) No change.

61G15-20.0015 Application for Certification as Engineering Intern.

(1) Any person desiring to be licensed as an engineering intern in this state shall submit an application to the Board. The application FBPE/003 (09/19), entitled "Application For Engineer Intern Certification," is hereby incorporated by reference and may be obtained from the Board office at 2639 North Monroe Street, Suite B-112, Tallahassee, Florida 32303; the Board's website at <http://www.fbpe.org/licensure/application-process> or at <http://www.flrules.org/Gateway/reference.asp?No=Ref->. The Board shall certify applicants who have completed the application form, remitted the application fee(s) required by chapter 61G15-24, F.A.C., achieved a passing score on the Fundamentals of Engineering (FE) Examination and Florida Study Guide, and have graduated from, "a Board approved engineering program" as defined by subsection 61G15-20.001(2), F.A.C. ~~:(a) The applicant meets the current criteria listed in section 471.013, F.S.~~

~~(2)~~(3) No change.

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**Board of Professional Engineers**

RULE NO.: RULE TITLE:

61G15-22.001 Continuing Education Requirements

**NOTICE OF CHANGE**

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 45 No. 188, September 26, 2019 issue of the Florida Administrative Register.

The changes are in response to written comments submitted by the staff of the Joint Administrative Procedures Committee and discussion and subsequent vote by the board at a public meeting held November 6, 2019. The changes are as follows:

61G15-22.001 Continuing Education Requirements.

(1) Each licensee shall complete eighteen (18) continuing education hours during each license renewal biennium as a condition of license renewal. Four (4) hours shall relate to the licensee’s area(s) of practice; one (1) hour must be related to professional ethics; and one (1) hour shall relate to chapter 471, F.S., and the rules of the Board. The remaining hours may relate to any topic pertinent to the practice of engineering as defined in rule 61G15-22.002, F.A.C.

(a) The one (1) hour of professional ethics must be obtained from a professional ethics course approved for credit in any US jurisdiction.

(b) The one (1) hour of laws and rules required by section 471.017, F.S., must be obtained from courses approved by the Board pursuant to rule 61G15-22.0105, F.A.C.

(c) Pursuant to section 471.017(3)(a), F.S., a licensee may earn the required professional ethics and laws and rules hours by serving as a member of the Legislature or as an elected state or local official.

(2) through (4) No change.

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**Florida Real Estate Commission**

RULE NO.: RULE TITLE:

61J2-1.011 License Fees

**NOTICE OF CHANGE**

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 45 No. 188, September 26, 2019 issue of the Florida Administrative Register.

The changes are in response to written comments submitted by the staff of the Joint Administrative Procedures Committee and discussion and subsequent vote by the board at a public hearing held October 15, 2019. The changes are as follows:

61J2-1.011 License Fees.

(1) through (5) No change.

(6) The permit license fees for school related categories shall be as follows:

(a) No change.	
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(b) Effective July 1, 2014, the initial permit licensure fees shall be:

Real Estate School	No change.
Real Estate School Additional Location	No change.
No change.	

(c) Effective July 1, 2019, the biennial permit license renewal fees shall be:

No change.	
No change.	
No change.	

Beginning July 1, 2021, the biennial license renewal fee for School Instructors returns to the previous amount of \$64.00.

(7) No change.

(8) Effective July 1, 2014, the initial registration licensure fee for registration of a corporation, partnership, limited liability company or limited liability partnership is:

No change.	
No change.	

(9) Effective July 1, 2019, a temporary 50% reduction of the biennial registration license renewal fee of a corporation, partnership, limited liability company or limited liability partnership registration until June 30, 2021, fee shall be:

No change	\$36.00
No change	\$32.00

Beginning July 1, 2021, the biennial registration license renewal fees return to the previous amounts of \$72.00 or 64.00, respectively.

Rulemaking Authority 455.219, 475.05, 475.125, 475.24 FS. Law Implemented 215.34(2), 455.217, 455.219, 455.2281, 475.04, 475.125, 475.15, 475.182, 475.24, 475.451 FS. History—New 10-10-79, Amended 1-1-80, 4-14-81, 9-13-82, 10-19-83, 8-12-84, 10-13-85, Formerly 21V-1.11, Amended 2-1-87, 1-1-88, 5-5-88, 10-13-88, 9-10-89, 1-4-90, 2-13-90, 3-27-90, 8-21-90, 10-9-90, 1-13-91, 8-19-91, 7-1-93, Formerly 21V-1.011, Amended 7-18-94, 12-17-95, 12-30-97, 1-19-99, 4-18-99, 2-24-00, 11-17-03, 3-8-05, 12-6-07, 8-18-08, 5-8-13, 6-29-14, 9-16-15, 9-13-16, 9-27-17, 8-15-19, \_\_\_\_\_.

**Section IV  
Emergency Rules**

NONE

**Section V  
Petitions and Dispositions Regarding Rule  
Variance or Waiver**

**WATER MANAGEMENT DISTRICTS**

Southwest Florida Water Management District

RULE NO.: RULE TITLE:

40D-22.201 Year-Round Water Conservation Measures

The Southwest Florida Water Management District hereby gives notice: that on November 8, 2019, the Southwest Florida Water Management District has issued an order granting a variance.

Petitioner's Name: Lansbrook Master Association, Inc. - File Tracking No. 20-4304

Date Petition Filed: October 9, 2019  
 Rule No.: 40D-22.201, F.A.C.  
 Nature of the rule for which variance or waiver was sought:  
 Lawn and landscape irrigation  
 Date Petition Published in the Florida Administrative Register:  
 October 23, 2019  
 General Basis for Agency Decision: Petitioner demonstrated substantial hardship and proposed an alternative means of achieving the purpose of the statute implemented by the rule.  
 A copy of the Order or additional information may be obtained by contacting: Michael Bench, 7601 US Highway 301, Tampa, Florida 33637, (813) 985-7481 x. 2298, water.variances@watermatters.org. (T2019041).

AGENCY FOR HEALTH CARE ADMINISTRATION  
 Health Facility and Agency Licensing  
 RULE NO.: RULE TITLE:  
 59A-4.1265 Emergency Environmental Control for Nursing Homes  
 NOTICE IS HEREBY GIVEN that on November 4, 2019, the Agency for Health Care Administration, received a petition for variance from subsection 59A-4.1265(5), F.A.C., from Heather Hill Healthcare Center to implement the Detailed Nursing Home Emergency Power Plan. The petition was assigned case number 2019017205. Any interested person or other agency may submit written comments on the petition within 14 days after this notice by e-mailing LTCstaff@ahca.myflorida.com.  
 A copy of the Petition for Variance or Waiver may be obtained by contacting: Jacqueline Williams, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop #33, Tallahassee, Florida 32308 or e-mailing LTCstaff@ahca.myflorida.com.

AGENCY FOR HEALTH CARE ADMINISTRATION  
 Health Facility and Agency Licensing  
 RULE NO.: RULE TITLE:  
 59A-4.1265 Emergency Environmental Control for Nursing Homes  
 NOTICE IS HEREBY GIVEN that on November 6, 2019, the Agency for Health Care Administration, received a petition for variance from subsection 59A-4.1265(5), F.A.C., from Lake View Care Center at Delray to implement the Detailed Nursing Home Emergency Power Plan. The petition was assigned case number 2019017297. Any interested person or other agency may submit written comments on the petition within 14 days after this notice by e-mailing LTCstaff@ahca.myflorida.com.  
 A copy of the Petition for Variance or Waiver may be obtained by contacting: Jacqueline Williams, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop #33, Tallahassee, Florida 32308 or e-mailing LTCstaff@ahca.myflorida.com.

AGENCY FOR HEALTH CARE ADMINISTRATION  
 Health Facility and Agency Licensing  
 RULE NO.: RULE TITLE:  
 59A-36.024 Waivers  
 NOTICE IS HEREBY GIVEN that on November 1, 2019, the Agency for Health Care Administration, received a petition for variance from Rule 59A-36.025, F.A.C., from Harborchase of Tamarac to implement the Detailed Emergency Environmental Control Plan. The petition was assigned case number 2019017108. Any interested person or other agency may submit written comments on the petition within 14 days after this notice by e-mailing assistedliving@ahca.myflorida.com.  
 A copy of the Petition for Variance or Waiver may be obtained by contacting: Chequita Byrd, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop #30, Tallahassee, Florida 32308 or e-mailing assistedliving@ahca.myflorida.com.

AGENCY FOR HEALTH CARE ADMINISTRATION  
 Health Facility and Agency Licensing  
 RULE NO.: RULE TITLE:  
 59A-36.025 Emergency Environmental Control for Assisted Living Facilities  
 NOTICE IS HEREBY GIVEN that on November 1, 2019, the Agency for Health Care Administration, received a petition for variance from Rule 59A-36.025, F.A.C., from Harborchase of Coral Springs to implement the Detailed Emergency Environmental Control Plan. The petition was assigned case number 2019017113. Any interested person or other agency may submit written comments on the petition within 14 days after this notice by e-mailing assistedliving@ahca.myflorida.com.  
 A copy of the Petition for Variance or Waiver may be obtained by contacting: Chequita Byrd, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop #30, Tallahassee, Florida 32308 or e-mailing assistedliving@ahca.myflorida.com.

AGENCY FOR HEALTH CARE ADMINISTRATION  
 Health Facility and Agency Licensing  
 RULE NO.: RULE TITLE:  
 59A-36.025 Emergency Environmental Control for Assisted Living Facilities  
 NOTICE IS HEREBY GIVEN that on November 1, 2019, the Agency for Health Care Administration, received a petition for variance from Rule 59A-36.025, F.A.C., from Harborchase of Naples to implement the Detailed Emergency Environmental Control Plan. The petition was assigned case number 2019017114. Any interested person or other agency may submit written comments on the petition within 14 days after this notice by e-mailing assistedliving@ahca.myflorida.com.



A copy of the Petition for Variance or Waiver may be obtained by contacting: Chequita Byrd, Agency for Health Care Administration, 2727 Mahan Drive, Mail Stop #30, Tallahassee, Florida 32308 or e-mailing [assistedliving@ahca.myflorida.com](mailto:assistedliving@ahca.myflorida.com).

**FLORIDA HOUSING FINANCE CORPORATION**

**RULE NO.: RULE TITLE:**

67-48.004 Selection Procedures for Developments

NOTICE IS HEREBY GIVEN that on November 8, 2019, the Florida Housing Finance Corporation, received a petition for waiver of paragraph 67-48.004(3)(d) from MHP Jordan Bayou, LLC so that it may make changes to the ownership and developer structures to admit a Non-Profit member to MHP Jordan Bayou, LLC and to MHP Jordan Bayou Developer, LLC.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Ana McGlamory, Corporation Clerk, Florida Housing Finance Corporation, 227 North Bronough Street, Suite 5000, Tallahassee, FL 32301-1329. The Petition has also been posted on Florida Housing's website at [floridahousing.org](http://floridahousing.org). Florida Housing will accept comments concerning the Petition for 14 days from the date of publication of this notice. To be considered, comments must be received on or before 5:00 p.m., Eastern Time, on the 14th day after publication of this notice at Florida Housing Finance Corporation, 227 North Bronough Street, Suite 5000, Tallahassee, Florida 32301.

**Section VI**

**Notice of Meetings, Workshops and Public Hearings**

**DEPARTMENT OF LAW ENFORCEMENT**

The Florida Department of Law Enforcement announces a public meeting to which all persons are invited.

**DATE AND TIME:** Monday, December 16, 2019, 9:00 a.m.

**PLACE:** Florida Department of Law Enforcement, 2331 Phillips Road, Room B1055, Tallahassee, FL 32308

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** Nominations for consideration for induction into the Florida Law Enforcement Officers' Hall of Fame for 2020 pursuant to Rule 11D-10.003, F.A.C.

If a person decides to appeal any decision made by the Selection Committee with respect to any matter considered at this meeting, such person is responsible for ensuring that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

A copy of the agenda may be obtained by contacting: Vickie Koenig, Chief of Policy and Special Programs, Criminal Justice

Professionalism, Post Office Box 1489, Tallahassee, FL 32302, (850)410-8600.

Pursuant to the provision 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: Vickie Koenig, Chief of Policy and Special Programs, Criminal Justice Professionalism, Post Office Box 1489, Tallahassee, FL 32302, (850)410-8600. 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).

**DEPARTMENT OF TRANSPORTATION**

The Florida Department of Transportation (FDOT), Florida's Turnpike Enterprise (FTE), announces a public meeting to which all persons are invited.

**DATE AND TIME:** Thursday, November 21, 2019, 5:30 p.m. – 7:30 p.m.

**PLACE:** Junior Achievement of South Florida, 1130 Coconut Creek Boulevard, Coconut Creek, FL 33066

If the meeting cannot be held on November 21, 2019 due to severe weather or unforeseen conditions, it will be held on the alternate date of December 5, 2019 at the same time and place.

If you cannot attend the meeting in person, please join us by visiting the study website at

[www.Turnpike595toWiles.com](http://www.Turnpike595toWiles.com) starting on November 21, 2019 for an online version of the meeting. This online meeting will be accessible anywhere, anytime, and will provide the same information as the in-person meeting.

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** This Public Kickoff Meeting will be conducted as an information gathering meeting for the Florida's Turnpike (SR 91) Widening from south of I-595 to Wiles Road Project Development and Environment (PD&E) Study (Financial Project Identification Number 442212-1). The meeting will be held as an informal open house and will include an informational video and exhibits that describe the PD&E Study process, study area and need for the proposed improvements. The meeting will give interested persons an opportunity to review preliminary project information, ask questions and provide comments.

Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability, or family status.

A copy of the agenda may be obtained by contacting: Jazlyn Heywood, Project Manager, at (407)264-3298 or by email at [Jazlyn.Heywood@dot.state.fl.us](mailto:Jazlyn.Heywood@dot.state.fl.us). For project information and updates throughout the study, you may visit the study website at [www.Turnpike595toWiles.com](http://www.Turnpike595toWiles.com).

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 seven (7) days before the workshop/meeting by contacting: Jazlyn Heywood, Project Manager, as noted above. If any person requires translation services (free of charge), please contact Jazlyn Heywood at least seven (7) days before the workshop/meeting. 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).

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#### DEPARTMENT OF TRANSPORTATION

The Florida Department of Transportation announces a public meeting to which all persons are invited.

DATE AND TIME: November 20, 2019, 1:30 p.m. – 4:30 p.m.

PLACE: Hilton Miami Downtown, 1601 Biscayne Boulevard, Miami, FL 33132, Tenor Room

GENERAL SUBJECT MATTER TO BE CONSIDERED: Florida Transportation Plan-Strategic Intermodal System Policy Plan Automated, Connected, Electric, Shared Subcommittee meeting for updating the Florida Transportation Plan.

A copy of the agenda may be obtained by contacting: Jim Halley, (850)414-4817 or Romero Dill, (850)414-4932.

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: Paula San Gregorio, (850)414-4811. Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability or family status. 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).

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#### DEPARTMENT OF CITRUS

The Florida Department of Citrus announces a public meeting to which all persons are invited.

DATE AND TIME: November 20, 2019, 9:00 a.m.

PLACE: Florida Department of Citrus, 605 East Main Street, Bartow, Florida 33830

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Commission will convene for the regularly scheduled meeting of the Florida Citrus Commission. The Commission will address issues pertaining to budget items and revisions, contracts, consumer education and engagement programs, program evaluation measurements, and any other matter addressed during regular meetings of the Commission.

A copy of the agenda may be obtained by contacting: Heather Anderson at HAnderson@citrus.myflorida.com or 1(863)537-3950.

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 48 hours before the workshop/meeting by

contacting: Dianne Screws at dscrews@citrus.myflorida.com or 1(863)537-3984. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

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#### EXECUTIVE OFFICE OF THE GOVERNOR

The following state governmental agencies, boards and commissions announce a public meeting to which all persons are invited:

State Board of Administration  
 Division of Bond Finance  
 Financial Services Commission  
 Office of Insurance Regulation  
 Office of Financial Regulation  
 Department of Veterans' Affairs  
 Department of Highway Safety and Motor Vehicles  
 Department of Law Enforcement

Department of Revenue  
 Administration Commission  
 Florida Land and Water Adjudicatory Commission  
 Board of Trustees of the Internal Improvement Trust Fund  
 Department of Environmental Protection

DATE AND TIME: November 25, 2019, 9:00 a.m.

**We'll be moving our Cabinet Aides meeting (previously scheduled for November 27, 2019) to Monday, November 25, 2019.**

PLACE: Cabinet Meeting Room, Lower Level, The Capitol, Tallahassee, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED:

The **State Board of Administration** will take action on matters duly presented on its agenda, which may include such matters as Executive Director's reports; approval of fiscal sufficiency of state bond issues; approval of sale of local bonds at an interest rate in excess of statutory interest rate limitation; reports on investment performance; designation of banks as depositories for state funds; adoption of rules and regulations; investment of state funds pursuant to Chapter 215, F.S.; and consideration of other matters within its authority pursuant to Chapters 215 and 344, F.S., and Section 16 of Article IX of the Florida Constitution of 1885, as continued by subsection 9(c) of Article XII of the Florida Constitution of 1968.

The **Division of Bond Finance** of the State Board of Administration will take action on matters duly presented on its agenda, which will deal with the issuance of State bonds, arbitrage compliance and related matters.

The **Financial Services Commission** will take action on matters duly presented on its agenda which may include, but not be limited to; matters relating to rulemaking for all activities of the Office of Insurance Regulation concerning insurers and other risk bearing entities, including licensing, rates, policy forms, market conduct, claims, adjusters, issuance of certificates of authority, solvency, viatical settlements, premium financing, and administrative supervision, as provided under the Insurance Code or Chapter 636, F.S., and matters related to rulemaking for all activities of the Office of Financial Regulation relating to the regulation of banks, credit unions, other financial institutions, finance companies, retail installment sales providers, title loan lenders, collection agencies, mortgage brokers, mortgage lenders, certified capital companies, money services businesses, and the securities industry.

The **Department of Veterans' Affairs** will take action on matters duly presented on its agenda which may include the administration of the Department as well as actions taken to further the Department's mission of providing assistance to veterans and their dependents, pursuant to Section 292.05, F.S. The **Department of Highway Safety and Motor Vehicles** will take action on matters duly presented on its agenda, which may include such matters as approval of agency policies, taking agency action with regard to administrative procedure matters, and considering other matters within its authority pursuant to Florida Statutes.

The **Department of Law Enforcement** will take action on matters duly presented on its agenda which may include but not be limited to such matters as transfer of agency funds or positions, formulation of Departmental Rules, administrative procedure matters, submittal of reports as required, enter into contracts as authorized and to consider other matters within its authority pursuant to Chapters 20, 23, 120 and 943, F.S.

The **Department of Revenue** will act on matters duly presented on its agenda which may include approval of rules, legislative concept proposals, contracts over \$100,000, Departmental budgets, administrative procedure matters, and consideration of other matters within its authority.

The **Administration Commission** will take action on matters duly presented on its agenda which may include such matters as to create or transfer agency funds or positions, approve Career Service rules, administrative procedure matters, environmental matters arising under Chapter 380, F.S., comprehensive planning issues pursuant to Section 163.3184, F.S., determine sheriffs' budget matters, and consider other matters within its authority pursuant to various statutes including Chapters 110, 215 and 216, F.S.

The **Florida Land and Water Adjudicatory Commission** will take action on matters duly presented on its agenda including appeals of local government development orders in

areas of critical state concern or of developments of regional impact under Section 380.07, F.S.; and review of water management matters under Chapter 373, F.S. The Commission will also review Department of Environmental Protection's rules and orders which, prior to July 1, 1993, the Governor and Cabinet, sitting as the head of the Department of Natural Resources, had authority to issue or promulgate.

The **Board of Trustees of the Internal Improvement Trust Fund** will take action on matters for which it is responsible pursuant to law (including duties pursuant to Title 18 of the Florida Statutes and Title 18 of the Florida Administrative Code) and that are duly presented on its agenda, which may include such matters as aquacultural issues as presented by the Division of Aquaculture in the Department of Agriculture and Consumer Services; mineral leases or sales; state or sovereign land leases, sales, exchanges, dedications, and easements; conservation and preservation lands and other land purchases; land planning matters and other matters within its authority.

The **Department of Environmental Protection** will present for consideration those matters required by law to be reviewed by the Governor and Cabinet, sitting as the Siting Board, which may include, but are not limited to siting of power plants and electric and natural gas transmission lines.

A copy of any of the above agendas submitted to the Governor and Cabinet for this meeting may be obtained by viewing the website of the Governor and Cabinet at <http://www.myflorida.com/myflorida/cabinet/> or by contacting each individual agency.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this meeting is asked to provide at least 48 hours' notification before the meeting by contacting: the Governor's Cabinet Affairs Office, (850)488-5152.

**CABINET AIDES BRIEFING:** On the Wednesday of the week prior to the above meeting, there will be a meeting of the aides to the Governor and Cabinet Members at 9:00 a.m., Cabinet Meeting Room, Lower Level, The Capitol, Tallahassee.

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#### DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

##### Board of Employee Leasing Companies

The Board of Employee Leasing Companies announces a telephone conference call to which all persons are invited.

DATE AND TIME: Friday, November 22, 2019, 2:00 p.m.

PLACE: Via Telephone Conference Call. To connect, dial 1(888)585-9008, Conference Pass Code: 258-893-642

GENERAL SUBJECT MATTER TO BE CONSIDERED:  
General Business Meeting

A copy of the agenda may be obtained by contacting: Board of Employee Leasing Companies, 2601 Blair Stone Road, Tallahassee, FL 32399, (850)717-1984.

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 2 days before the workshop/meeting by contacting: Board of Employee Leasing Companies, 2601 Blair Stone Road, Tallahassee, FL 32399, (850)717-1984. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Board of Employee Leasing Companies, 2601 Blair Stone Road, Tallahassee, FL 32399, (850)717-1984.

**DEPARTMENT OF ENVIRONMENTAL PROTECTION**  
**NOTICE OF CANCELLATION:** The Florida Department of Environmental Protection announces the cancellation of a previously noticed public meeting.

**DATE AND TIME:** Formerly: November 12, 2019, 2:00 p.m.  
**CANCELLED**

**PLACE:** Webinar

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** Cancellation of the Lake Okechobee BMAP webinar previously scheduled for November 12, 2019, 2:00 p.m. This public webinar, which was noticed in the Florida Administrative Register, Volume 45, Number 213, on October 31, 2019, has been cancelled. The meeting will be rescheduled at a later time. When rescheduled, a notice of that meeting will be published in the Florida Administrative Register.

For more information, you may contact: Sara Davis at (850)245-8825 or Sara.C.Davis@FloridaDEP.gov.

**DEPARTMENT OF HEALTH**

Board of Medicine

The Boards of Medicine and Osteopathic Medicine’s Physician Certification Pattern Review Panel announces a public meeting to which all persons are invited.

**DATE AND TIME:** (UPDATE/CANCELLATION) Friday, November 15, 2019, 8:00 a.m. This meeting has been rescheduled for Thursday, December 5, 2019, immediately following the Surgical Care/Quality Assurance Committee Meeting or soon thereafter. This meeting has been cancelled as of Wednesday, November 6, 2019.

**PLACE:** Mission Inn Resort & Club, 10400 County Road 48, Howey-in-the Hills, Florida 34737. The hotel phone number is (352)324-3101.

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** General business of the Panel. Please check the Board website at <https://flboardofmedicine.gov/meeting-information/> or <https://floridasosteopathicmedicine.gov/meeting-information/> for cancellations or changes to meeting dates or call the Board of Medicine at (850)245-4131 or the Board of Osteopathic Medicine at (850)245-4161 for information.

A copy of the agenda may be obtained by contacting: Board of Medicine (BOM) Meeting Materials at <https://flboardofmedicine.gov/meeting-information/> or Board of Osteopathic Medicine (BOOM)

Meeting Materials at <https://floridasosteopathicmedicine.gov/meeting-information/>.

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 10 days before the workshop/meeting by contacting: BOM Meeting Materials at BOM.MeetingMaterials@flhealth.gov or call at (850)245-4131. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: BOM Meeting Materials at BOM.MeetingMaterials@flhealth.gov or call at (850)245-4131.

**DEPARTMENT OF HEALTH**

Board of Nursing

The Board of Nursing announces a telephone conference call to which all persons are invited.

**DATE AND TIME:** November 22, 2019, 1:30 p.m.

**PLACE:** Toll Free Number, 1(888)585-9008, 275-112-502

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** To consider cases where Probable Cause has previously been found.

A copy of the agenda may be obtained by contacting: <https://floridasnursing.gov/meeting-information/>.

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 48 hours before the workshop/meeting by contacting: 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

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**FLORIDA HOUSING FINANCE CORPORATION**

The Florida Housing Finance Corporation announces a hearing to which all persons are invited.

**DATE AND TIME:** November 19, 2019, 2:00 p.m. (Tallahassee local time)

**PLACE:** The offices of Florida Housing Finance Corporation, 227 North Bronough Street, Suite 5000, Tallahassee, Florida 32301

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** To conduct a TEFRA hearing concerning the potential future issuance of tax-exempt bonds by Florida Housing to provide additional financing for the acquisition, construction or rehabilitation of the following multifamily residential rental development in the aggregate face amount, not to exceed the amount listed below:

Woodland Grove, a 190-unit multifamily residential rental development located at NE Corner of SW 268th Street and 142nd Avenue, Miami, Miami-Dade County, FL 33032. The owner and operator of the development is Woodland Grove Apartments, LLC, 7735 NW 146 Street, Suite 306, Miami Lakes, FL 33016 or such successor in interest in which Woodland Grove Apartments, LLC or an affiliate thereof, is a managing member, general partner and/or controlling stockholder. The prospective manager of the proposed development is Centennial Management Corp., 7735 NW 146 Street, Suite 306, Miami Lakes, FL 33016. The tax-exempt bond amount is not to exceed \$22,000,000.

All interested parties may present oral comments at the public TEFRA hearing or submit written comments regarding the potential bond issuance for the development being financed. Written comments should be received by Florida Housing by 5:00 PM (Tallahassee local time), November 15, 2019, and should be addressed to the attention of Tim Kennedy, Assistant Director of Multifamily Programs. Any persons desiring to present oral comments should appear at the hearing.

If requested in writing, a fact-finding hearing will be held in the county where the property is located. When possible, the local hearing will be held before the formal TEFRA hearing and comments received at the local hearing will be placed on record at the TEFRA hearing.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact Tim Kennedy, Assistant Director of Multifamily Programs,

Florida Housing Finance Corporation at (850)488-4197 at least five calendar days prior to the meeting. If you are hearing impaired, please contact Florida Housing using the Dual Party Relay System that can be reached at 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

Any person who decides to appeal any decision made by Florida Housing with respect to any matter considered at this hearing, will need a record of the proceedings, and for such purpose may need to ensure that a verbatim record of the proceedings be made, which will include the testimony and evidence upon which the appeal is based.

A copy of the agenda may be obtained by contacting:

For more information, you may contact: Tim Kennedy, Assistant Director of Multifamily Programs, Florida Housing Finance Corporation at (850)488-4197.

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**FLORIDA HOUSING FINANCE CORPORATION**

The Florida Housing Finance Corporation announces a hearing to which all persons are invited.

**DATE AND TIME:** November 19, 2019, 3:00 p.m. (Tallahassee local time)

**PLACE:** The offices of Florida Housing Finance Corporation, 227 North Bronough Street, Suite 5000, Tallahassee, Florida 32301

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** To conduct a TEFRA hearing concerning the potential future issuance of tax-exempt notes by Florida Housing to provide additional financing for the acquisition, construction or rehabilitation of the following multifamily residential rental development in the aggregate face amount, not to exceed the amount listed below:

Boulevard Tower 2, a 119-unit multifamily residential rental development located at SE Corner of Chestnut Street and N. Oregon Avenue, Tampa, Hillsborough County, FL 33607. The owner and operator of the development is WRDG T3C, LP, 444 Brickell Avenue, Suite 301, Miami, FL 33131 or such successor in interest in which WRDG T3C, LP or an affiliate thereof, is a managing member, general partner and/or controlling stockholder. The prospective manager of the proposed development is TRG Management Company LLP, 2200 North Commerce Parkway, Suite 100, Weston, FL 33326. The tax-exempt note amount is not to exceed \$28,050,000.

All interested parties may present oral comments at the public TEFRA hearing or submit written comments regarding the potential note issuance for the development being financed. Written comments should be received by Florida Housing by 5:00 PM (Tallahassee local time), November 15, 2019, and should be addressed to the attention of Tim Kennedy, Assistant Director of Multifamily Programs. Any persons desiring to present oral comments should appear at the hearing.

If requested in writing, a fact-finding hearing will be held in the county where the property is located. When possible, the local hearing will be held before the formal TEFRA hearing and comments received at the local hearing will be placed on record at the TEFRA hearing.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact Tim Kennedy, Assistant Director of Multifamily Programs, Florida Housing Finance Corporation at (850)488-4197 at least five calendar days prior to the meeting. If you are hearing impaired, please contact Florida Housing using the Dual Party Relay System that can be reached at 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

Any person who decides to appeal any decision made by Florida Housing with respect to any matter considered at this hearing, will need a record of the proceedings, and for such purpose may need to ensure that a verbatim record of the proceedings be made, which will include the testimony and evidence upon which the appeal is based.

A copy of the agenda may be obtained by contacting: NA  
 For more information, you may contact: Tim Kennedy, Assistance Director of Multifamily Programs, Florida Housing Finance Corporation at (850)488-4197.

**FLORIDA HOUSING FINANCE CORPORATION**

The Florida Housing Finance Corporation announces a hearing to which all persons are invited.

**DATE AND TIME:** November 19, 2019, 2:30 p.m. (Tallahassee local time)

**PLACE:** The offices of Florida Housing Finance Corporation, 227 North Bronough Street, Suite 5000, Tallahassee, Florida 32301

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** To conduct a TEFRA hearing concerning the potential future issuance of tax-exempt notes by Florida Housing to provide additional financing for the acquisition, construction or rehabilitation of the following multifamily residential rental development in the aggregate face amount, not to exceed the amount listed below:

Lake Wales Gardens, a 96-unit multifamily residential rental development located at 504 S 4th Street, Lake Wales, Polk County, FL 33853. The owner and operator of the development is SP Lake LLC, 5403 West Gray Street, Tampa, FL 33609 or such successor in interest in which West Lake LLC or an affiliate thereof, is a managing member, general partner and/or controlling stockholder. The prospective manager of the proposed development is Cambridge Management, Inc. dba Cambridge Management of Washington, Inc, 1916 65th Avenue W, Tacoma, WA 98466. The tax-exempt note amount is not to exceed \$8,250,000.

All interested parties may present oral comments at the public TEFRA hearing or submit written comments regarding the potential note issuance for the development being financed. Written comments should be received by Florida Housing by 5:00 PM (Tallahassee local time), November 15, 2019, and should be addressed to the attention of Tim Kennedy, Assistant Director of Multifamily Programs. Any persons desiring to present oral comments should appear at the hearing.

If requested in writing, a fact-finding hearing will be held in the county where the property is located. When possible, the local hearing will be held before the formal TEFRA hearing and comments received at the local hearing will be placed on record at the TEFRA hearing.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact Tim Kennedy, Assistant Director of Multifamily Programs, Florida Housing Finance Corporation at (850)488-4197 at least five calendar days prior to the meeting. If you are hearing impaired, please contact Florida Housing using the Dual Party Relay System that can be reached at 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

Any person who decides to appeal any decision made by Florida Housing with respect to any matter considered at this hearing, will need a record of the proceedings, and for such purpose may need to ensure that a verbatim record of the proceedings be made, which will include the testimony and evidence upon which the appeal is based.

A copy of the agenda may be obtained by contacting: NA  
 For more information, you may contact: Tim Kennedy, Assistant Director of Multifamily Programs, Florida Housing Finance Corporation at (850)488-4197.

**DEPARTMENT OF MILITARY AFFAIRS**

The Department of Military Affairs announces a public meeting to which all persons are invited.

**DATE AND TIME:** November 15, 2019, 8:00 a.m.

**PLACE:** St. Francis Barracks, Command Conference Room

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** Armory Board Meeting. The Armory Board will review Land Use, Staff Reports, CFMO Reports, CBJTC Reports, and other business relative to real property and facility management issues under its control.

A copy of the agenda may be obtained by contacting: Sylvia Sepulveda, (904)823-0201.

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 2 days before the workshop/meeting by contacting: Sylvia Sepulveda, (904)823-0201. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Sylvia Sepulveda, (904)823-0201.

**AFRICAN AMERICAN HISTORY TASK FORCE**

The African American History Task Force announces a public meeting to which all persons are invited.

**DATES AND TIMES:** November 21, 2019, 6:00 p.m. – 8:00 p.m.; November 22, 2019, 9:00 a.m. – 4:00 p.m.

**PLACE:** Rosen Shingle Creek, 9939 Universal Blvd, Orlando, FL 32819

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** Annual meeting 2019-2020 of the African American History Task Force

A copy of the agenda may be obtained by contacting: Zandra Higley or Dr. Bernadette Kelley-Brown, 501 Orr Drive - Gore Education Center, Building C, Room 316 Tallahassee, FL 32307, (850)412-5203, Fax (850)412-5204, www.afroamfl.org. 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: 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).

For more information, you may contact: Zandra Higley, 501 Orr Drive - Gore Education Center, Building C, Room 316 Tallahassee, FL 32307, (850)412-5203, Fax (850)412-5204, www.afroamfl.org.

**ENTERPRISE FLORIDA, INC.**

The Florida Opportunity Fund announces a public meeting to which all persons are invited.

**DATE AND TIME:** Thursday, November 21, 2019, 1:30 p.m.

**PLACE:** Enterprise Florida, 800 N. Magnolia Avenue, Suite 1100, Orlando, FL 32803

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** Board administrative matters

A copy of the agenda may be obtained by contacting: Lorna Dusti at (407)956-5651.

For more information, you may contact: Lorna Dusti at (407)956-5651.

**HDR ENGINEERING, INC. - PENSACOLA**

The Florida Department of Transportation (FDOT) announces a hearing to which all persons are invited.

**DATE AND TIME:** Tuesday, December 10, 2019, 5:00 p.m. – 6:00 p.m. Central Time

**PLACE:** Fricker Community Center, 900 North F Street, Pensacola.

**GENERAL SUBJECT MATTER TO BE CONSIDERED:** The Florida Department of Transportation (FDOT) will hold a public hearing for pedestrian safety improvements on U.S. 90 (West Cervantes Street) from Dominguez Street to A Street, Tuesday, December 10, 2019 at the Fricker Community Center, 900 North F Street, Pensacola.

The hearing will begin as an open-house at 5 p.m. CDT with a formal presentation at 5:30 p.m., followed by a public comment period. FDOT representatives will be available to discuss proposed improvements, answer questions, and receive comments.

FDOT is designing pedestrian safety and access improvements on West Cervantes from Dominguez Street to A Street. Proposed changes include reducing the width of the traffic lanes, adding crosswalks and pedestrian-controlled traffic signals, constructing a center median with a combination of plantings and a low barrier, adding new traffic signals, and adding supplementary lighting. The project is funded for construction with activities anticipated to begin fall 2020.

This hearing is being held without regard to race, color, national origin, age, sex, religion, disability or family status. Persons who require special accommodations under the Americans with Disabilities Act, or persons who require translation services (free of charge) should contact Tommy Johns, P.E., FDOT Project Manager, toll-free at 1(866)855-7275, or via email at tommy.johns@atkinsglobal.com, at least seven (7) days prior to the hearing.

A copy of the agenda may be obtained by contacting: Tommy Johns, P.E., FDOT Project Manager, toll-free at 1(866)855-7275, or via email at tommy.johns@atkinsglobal.com.

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: Tommy Johns, P.E., FDOT Project Manager, toll-free at 1(866)855-7275, or via email at tommy.johns@atkinsglobal.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).

For more information, you may contact: Tommy Johns, P.E., FDOT Project Manager, toll-free at 1(866)855-7275, or via email at tommy.johns@atkinsglobal.com; or Ian Satter, FDOT District 3 Public Information Director, at 1(888)638-0250, extension 1205, or via email at ian.satter@dot.state.fl.us.

**CH2M HILL**

The Florida Department of Transportation (FDOT) announces a hearing to which all persons are invited.

DATE AND TIMES: Tuesday, November 19, 2019, 5:30 p.m. ET; Open House; 6:00 p.m. ET Formal Presentation, followed by a public comment period.

PLACE: Cecil G. Trippe Municipal Building, 711 North Main Street, Havana, FL 32333

GENERAL SUBJECT MATTER TO BE CONSIDERED: This hearing is being held to provide interested persons an opportunity to express their views concerning access management changes that are being proposed as part of the resurfacing efforts along State Road (S.R.) 63 from S.R. 159 to County Road (C.R.) 159A in Gadsden County. The proposed design includes the resurfacing of existing S.R. 63 travel lanes, auxiliary lanes, median crossovers, and paved shoulders within the project limits. The project includes modifications at the C.R. 159A (Potter Woodberry Road) intersection and the Hinson Main Street intersections to enhance safety. The proposed access modifications will be reviewed during the public hearing. The project also involves minor roadway improvements. No additional right-of-way will be required. Maps, drawings, and other information will be on display. FDOT representatives will be available to discuss the proposed improvements, answer questions, and receive comments.

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: John Whittington, E.I., Project Manager at (850)330-1425 or via email at John.Whittington@dot.state.fl.us, or by mail at 1074 Highway 90, Chipley, Florida 32428.

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).

A copy of the agenda may be obtained by contacting: John Whittington, E.I., Project Manager at (850)330-1425 or via email at John.Whittington@dot.state.fl.us or by mail at 1074 Highway 90, Chipley, Florida 32428. You may also contact Ian Satter, FDOT District Three Public Information Director at 1(888)638-0250, extension 1205 or via email at Ian.Setter@dot.state.fl.us.

**RK&K**

The Florida Department of Transportation, District Seven announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, November 19, 2019, 5:30 p.m. – 7:30 p.m.

PLACE: Port Tampa Bay, Terminal 6, 1101 Channelside Drive, Tampa, FL 33602

GENERAL SUBJECT MATTER TO BE CONSIDERED: US 41/SR 45/South 50th Street at CSX Grade Separation Design Change Re-evaluation from South of Causeway Boulevard to North of Causeway Boulevard in Hillsborough County.

The purpose of this alternatives public workshop is to gather public input from interested persons about proposed alternatives for the improvement of this segment of US 41 and Causeway Boulevard. These improvements include considering a grade separation of US 41 at the CSX railroad crossing south of Causeway Boulevard, as well as mobility and safety improvements along US 41 and a thorough review of natural and social environmental impacts in the study area. The project begins just south of the CSX railroad crossing and extends to the north of Causeway Boulevard, a distance of approximately 1.5 miles. FDOT has sent notices to property owners located up to 300 feet of the proposed project right-of-way on either side of US 41.

Alternatives Public Workshop: Tuesday, November 19, 2019, Port Tampa Bay, Terminal 6, 1101 Channelside Drive, Tampa, FL 33602, 5:30 p.m. – 7:30 p.m.

During the workshop, the public will have an opportunity to review project displays and aerial photographs, submit comments about the proposed improvements, and discuss the proposed alternatives with FDOT and the project team. Your comments and input are important to us as part of the evaluation process. There will be a short presentation covering general project details which will run continuously throughout the workshop. Written or emailed comments not received at the workshop must be postmarked or emailed by November 29, 2019 to be included in the official meeting record. Written comments can be mailed to: Kirk Bogen, P.E., Environmental Management Engineer, Florida Department of Transportation, MS 7-500, 11201 N. McKinley Drive, Tampa, FL 33612.

For more information about the project or to submit a comment, please visit the project website at: <http://active.fdotd7studies.com/us41/csx-to-sr676/>. Following the workshop, a copy of all meeting materials will be available on the website.

For parking, enter the Port of Tampa at the primary entrance at the intersection of Kennedy Boulevard and Channelside Drive and make a right turn around the main Port Tampa Bay building. Signs will be posted to guide you to the workshop entrance. The meeting is also a short walk from TECO Streetcar Stop #5 which services every 15 minutes free of charge.

Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability or family status. Persons who require special accommodations under the Americans with Disabilities Act or persons who require translation services (free of charge) should contact: Alex Henry, Public Involvement Coordinator, at 1(813)975-6405 or



1(800)226-7220, or via e-mail at alex.henry@dot.state.fl.us at least seven (7) working days in advance of the meeting. The environmental review, consultation, and other actions required by applicable federal environmental laws for this project are being, or have been, carried out by the Florida Department of Transportation (FDOT) pursuant to 23 U.S.C. § 327 and a Memorandum of Understanding dated December 14, 2016 and executed by the Federal Highway Administration and FDOT.

Si usted tiene preguntas, si usted desea hacer algun comentario sobre este Proyecto o simplemente desea más información en español, favor de contactar a la señora Lilliam Escalera al teléfono 1(813)975-6445. Puede usar también el correo electrónico: Lilliam.Escalera@dot.state.fl.us.

For more information, you may contact: Lilliam Escalera, FDOT project manager at 1(813)975-6445 or via email at lilliam.escalera@dot.state.fl.us. Or you may contact Kris Carson, District Seven Public Information Officer at 1(813)975-6060 or via email at kristen.carson@dot.state.fl.us. A copy of the agenda may be obtained by contacting: NA

**Section VII**

**Notice of Petitions and Dispositions Regarding Declaratory Statements**

NONE

**Section VIII**

**Notice of Petitions and Dispositions Regarding the Validity of Rules**

Notice of Petition for Administrative Determination has been filed with the Division of Administrative Hearings on the following rules:

NONE

Notice of Disposition of Petition for Administrative Determination has been filed with the Division of Administrative Hearings on the following rules:

NONE

**Section IX**

**Notice of Petitions and Dispositions Regarding Non-rule Policy Challenges**

NONE

**Section X  
Announcements and Objection Reports of the Joint Administrative Procedures Committee**

NONE

**Section XI  
Notices Regarding Bids, Proposals and Purchasing**

DEPARTMENT OF EDUCATION  
DISTRICT BOARD OF TRUSTEES  
MIAMI DADE COLLEGE  
11011 S.W. 104th STREET  
MIAMI, FL 33176-3393

Responses to the Request for Proposals (RFP) listed below will be accepted in the PURCHASING DEPARTMENT, Room 9254, by 3:00 p.m. on December 5, 2019.

Prospective proposers may obtain the RFP solicitation at the College's Purchasing Department website, <http://www.mdc.edu/purchasing/bid-posting.aspx>, or by calling (305)237-2402.

BID NUMBER: 2020-RM1-21, BID TITLE: Miami Dade College Compensation Study

Direct questions regarding this Bid to: Roman Martinez, rmartin9@mdc.edu, Group Director - Purchasing Department, Miami Dade College, 11011 SW 104th Street, Miami, FL 33176, (305)237-0012.

If a person decides to appeal any decision with respect to any matter considered at the above-cited meeting, you will need a record of the proceedings, and for such purpose you may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based. A copy of the agenda may be obtained by writing to: Miami Dade College, Office of the Purchasing Director, 11011 S.W. 104 Street, Miami, FL 33176 or by calling (305)237-2402.

FLORIDA SHERIFFS ASSOCIATION  
Fire Rescue Vehicles, Ambulances and Other Equipment  
FLORIDA SHERIFFS ASSOCIATION  
COOPERATIVE PURCHASING PROGRAM  
2617 MAHAN DRIVE  
TALLAHASSEE, FLORIDA 32317-2519

Invitation to Bid

Bid Number: FSA20-VEF14.0

Bid Title: Fire Rescue Vehicles, Ambulances and Other Equipment

Mandatory Pre-Bid Meeting: January 14 & 15, 2020  
 Pre-Bid Meeting to be held at: Volusia County Emergency Operations Center, 3825 Tiger Bay Road, Daytona Beach, Florida 32124  
 Bid System Opens: February 3, 2020  
 Electronic Responses Due: March 2, 2020  
 Public Bid Opening: March 3, 2020  
 Bid Opening Location: Florida Sheriffs Association, 2617 Mahan Drive, Tallahassee, Florida 32317-2519  
 The Florida Sheriffs Association (FSA), Florida Fire Chiefs Association (FFCA) and the Florida Association of Counties (FAC) invite interested bidders, including Fire Rescue Vehicles and Ambulance Manufacturers and Dealers/Certified Representatives to submit responses in accordance with these solicitation documents. The Florida Sheriffs Association will serve as the "Contract Administrator" in the solicitation process and the administration of the resulting contract. The purpose of this bid is to establish a thirty-six (36) month contract, beginning April 1, 2020 and ending March 31, 2023, with manufacturer's authorized representatives for the purchase of new fire apparatus, fire vehicles and ambulances.

A copy of the Bid Calendar and announcements, including upcoming workshops, will be posted to the FSA Cooperative Purchasing Program web site: <https://www.flsheriffs.org/law-enforcement-programs/cooperative-purchasing-program/bid-announcements>

All prospective bidders are required to attend the mandatory Pre-Bid Meeting.

**ADVERTISEMENT**

Bid Name: Fire Rescue Vehicles, Ambulances and Other Equipment

Bid Number: FSA20-VEF14.0

The Florida Sheriffs Association (FSA), Florida Fire Chiefs Association (FFCA) and the Florida Association of Counties (FAC) invite interested bidders to submit electronic bid proposals for new fire apparatus, fire vehicles and ambulances, utilizing VendorLink, [www.myvendorlink.com](http://www.myvendorlink.com).

This contract shall be awarded to the lowest and best responsive qualified bidder by specification, manufacturer, by zone.

The Bidder warrants by virtue of bidding they are submitting a firm bid and prices quoted in their bid response will be good for an evaluation period of sixty (60) calendar days from the date of bid opening unless otherwise agreed to by the FSA.

Bidders are hereby advised that the Florida Sheriffs Association reserves the right to reject any and all bids, or separate portions thereof, and to waive any irregularity, technicality or omission if the FSA determines that doing so will serve in the FSA and purchaser best interest. The FSA may also reject any response not submitted in the manner specified by the solicitation documents.

**FLORIDA SHERIFFS ASSOCIATION**

By: Craig Chown, Cooperative Purchasing Program Manager

**AJAX BUILDING CORPORATION**

Notice to Bidders

BRFM-337 | FAMU CASS BUILDING - NOTICE TO BIDDERS

Date: 10/28/19 NOTICE TO BIDDERS

Sealed bids for furnishing all labor and material and performing all work necessary and incidental to the completion of

Bid Group	Bid Package No. & Description	Pre-Bid Conference Date - Time	Bid Date - Time
C	01.3 – Final Cleaning	11/19/19-10:00 a.m.	12/10/19 – 2:00 p.m.
C	09.2 – Hard Tile	11/19/19-10:00 a.m.	12/10/19 – 2:00 p.m.
C	12.1 – Window Treatment	11/19/19-10:00 a.m.	12/10/19 – 2:00 p.m.

for the BRFM-337 | FAMU Center for Access and Student Success Building (CASS Building) will be received by Ajax Building Corporation, 1080 Commerce Boulevard, Midway, Florida, 32343 until 2:00 p.m. Local Time, on the above referenced dates.

Each bid must be accompanied by a Bid Bond on the form enclosed in this package, certified check or cashier's check in an amount no less than five percent (5%) of the total amount of the base bid as guarantee that the bidder will, if awarded the contract, enter into a written contract, satisfactory in form, containing a penalty clause and requiring workers' compensation and public liability insurance and approval of subcontractor by Ajax Building Corporation and shall be prepared to provide Payment and Performance Bonds on the forms enclosed in this bid package to Ajax Building Corporation in the full amount of the contract price within seven (7) days after acceptance. Bidder must be a licensed Florida Contractor.

The Contract Documents, as defined in Subcontract Agreement form, may be examined at the office of Ajax Building Company LLC, FAMU CASS Project Trailer, 1735 Wahnish Way, Tallahassee, FL 32307. In addition, prequalified bidders may obtain a set of Contract Documents by downloading from Ajax Building Corporation's project-specific PROCORE site. Access information will be made available through validation of the prequalification process.

The Bid Documents are anticipated to be made available to prequalified bidders on the following dates:

Bid Group C – 11/19/19.

Interested bidders may obtain pre-qualification forms by contacting Ajax Building Company LLC's office. Only bidders

meeting pre-qualification criteria may bid. Bidders must submit a completed experience questionnaire and financial statement on the form entitled "Bidder Qualifications Questionnaire", incorporated herein by reference. The subcontractor's financial condition must demonstrate that adequate fixed and liquid assets and equipment are available to properly perform the Subcontract.

No bids may be withdrawn after the scheduled closing time for receipt of same for a period of sixty (60) days.

Proposals shall be sealed and plainly marked, "Bid", with name of project, bid package number, bid package description, name and address of bidder, time and date due.

The Construction Manager reserves the right to reject any and all bids received and to waive any and all informalities or irregularities in regard thereto.

Pre-Bid Conferences will be held at the above listed dates and times. Pre-Bid Conferences will be held at the office of Ajax Building Company LLC, FAMU CASS Project Trailer.

Dates are subject to change. Notice will be given to prequalified bidders.

For additional information, contact Chuck at (850)224-9571 or chuckl@ajaxbuilding.com.

FLORIDA A&M UNIVERSITY FACILITIES PLANNING,  
CONSTRUCTION AND SAFETY  
RFP 102519 FAMU Gibbs Hall 3rd Floor Build-out  
Addendum NO.1

REQUIRED PROPOSAL FORMAT- pg. 5

- 3.1 Introduction
- 3.2 Table of Contents
- 3.3 Response Content/Submittals
  - Tab 1 – Executive Summary
  - Tab 2 – Qualifications/Experience
  - Tab 3 – Proposed Approach
  - Tab 4 – Required Documents

Table A- Evaluation of Responses Cost Removed- pg. 23

Table 5-Cost Removed Pg. 31

## Section XII Miscellaneous

### DEPARTMENT OF STATE

Index of Administrative Rules Filed with the Secretary of State Pursuant to subparagraph 120.55(1)(b)6. – 7., F.S., the below list of rules were filed in the Office of the Secretary of State between 3:00 p.m., Monday, November 4, 2019 and 3:00 p.m., Friday, November 8, 2019.

Rule No.	File Date	Effective Date
25-30.350	11/5/2019	11/25/2019

25-30.360	11/5/2019	11/25/2019
59G-4.023	11/8/2019	11/28/2019
59G-4.029	11/8/2019	11/28/2019
59G-4.031	11/8/2019	11/28/2019
59G-4.052	11/8/2019	11/28/2019
60P-1.003	11/5/2019	**/**/****
60P-2.002	11/5/2019	**/**/****
60P-2.003	11/5/2019	**/**/****
61G10-15.003	11/5/2019	11/25/2019
61G10-15.004	11/5/2019	11/25/2019
61G10-18.001	11/5/2019	11/25/2019
61G20-2.001	11/5/2019	11/25/2019
61N-1.011	11/4/2019	11/24/2019
64B9-15.005	11/8/2019	11/28/2019
64B9-15.007	11/8/2019	11/28/2019
65C-19.001	11/4/2019	11/24/2019
65C-19.002	11/4/2019	11/24/2019
65C-19.003	11/4/2019	11/24/2019
65C-19.004	11/4/2019	11/24/2019
65C-19.005	11/4/2019	11/24/2019
65C-19.006	11/4/2019	11/24/2019
65C-19.007	11/4/2019	11/24/2019
65C-19.008	11/4/2019	11/24/2019
65C-19.009	11/4/2019	11/24/2019
65C-19.010	11/4/2019	11/24/2019
65C-25.001	11/6/2019	11/26/2019
65C-25.002	11/6/2019	11/26/2019
65C-25.004	11/6/2019	11/26/2019
65C-25.005	11/6/2019	11/26/2019
65C-25.006	11/6/2019	11/26/2019
65C-25.007	11/6/2019	11/26/2019
65C-25.008	11/6/2019	11/26/2019

65C-25.009	11/6/2019	11/26/2019
65C-43.004	11/4/2019	11/24/2019
65C-43.005	11/4/2019	11/24/2019
68-1.003	11/8/2019	11/28/2019
68D-15.002	11/8/2019	11/28/2019
69V-560.1000	11/8/2019	11/28/2019
69V-560.1012	11/8/2019	11/28/2019
69V-560.1013	11/8/2019	11/28/2019
69V-560.102	11/8/2019	11/28/2019
69V-560.103	11/8/2019	11/28/2019
69V-560.107	11/8/2019	11/28/2019
69V-560.201	11/8/2019	11/28/2019
69V-560.302	11/8/2019	11/28/2019
69V-560.403	11/7/2019	11/27/2019
69V-560.504	11/8/2019	11/28/2019
69V-560.602	11/8/2019	11/28/2019
69V-560.606	11/8/2019	11/28/2019
69V-560.608	11/8/2019	11/28/2019
69V-560.609	11/8/2019	11/28/2019
69V-560.7041	11/8/2019	11/28/2019
69V-560.7042	11/8/2019	11/28/2019
69V-560.7043	11/8/2019	11/28/2019
69V-560.707	11/8/2019	11/28/2019
69V-560.902	11/8/2019	11/28/2019
69V-560.903	11/8/2019	11/28/2019
69V-560.904	11/8/2019	11/28/2019
69V-560.905	11/8/2019	11/28/2019
69V-560.907	11/8/2019	11/28/2019
69V-560.908	11/8/2019	11/28/2019
69V-560.909	11/8/2019	11/28/2019
69V-560.910	11/8/2019	11/28/2019
69V-560.911	11/8/2019	11/28/2019

69V-560.912	11/8/2019	11/28/2019
69V-560.913	11/8/2019	11/28/2019
69W-200.002	11/6/2019	11/26/2019
69W-301.002	11/5/2019	11/25/2019
69W-600.001	11/6/2019	11/26/2019
69W-600.0012	11/6/2019	11/26/2019
69W-600.0013	11/6/2019	11/26/2019
69W-600.0016	11/6/2019	11/26/2019
69W-600.0017	11/6/2019	11/26/2019
69W-600.002	11/6/2019	11/26/2019
69W-600.0022	11/6/2019	11/26/2019
69W-600.0023	11/6/2019	11/26/2019
69W-600.0024	11/6/2019	11/26/2019
69W-600.0031	11/6/2019	11/26/2019
69W-600.0032	11/6/2019	11/26/2019
69W-600.0033	11/6/2019	11/26/2019
69W-600.013	11/6/2019	11/26/2019
69W-600.0131	11/6/2019	11/26/2019
69W-600.0132	11/6/2019	11/26/2019
69W-600.014	11/6/2019	11/26/2019
69W-600.0151	11/6/2019	11/26/2019
69W-600.017	11/6/2019	11/26/2019
69W-600.020	11/6/2019	11/26/2019
69W-700.001	11/5/2019	11/25/2019
69W-700.002	11/5/2019	11/25/2019
69W-800.001	11/5/2019	11/25/2019
69W-800.003	11/5/2019	11/25/2019
69W-800.004	11/5/2019	11/25/2019
69W-900.001	11/5/2019	11/25/2019
<b>LIST OF RULES AWAITING LEGISLATIVE APPROVAL SECTIONS 120.541(3), 373.139(7) AND/OR 373.1391(6), FLORIDA STATUTES</b>		

Rule No.	File Date	Effective Date
60FF1-5.009	7/21/2016	**/**/****
60P-1.003	11/5/2019	**/**/****
60P-2.002	11/5/2019	**/**/****
60P-2.003	11/5/2019	**/**/****
64B8-10.003	12/9/2015	**/**/****

DEPARTMENT OF ECONOMIC OPPORTUNITY  
 Division of Community Development  
 DEO Final Order No. 19-046  
 In re: AMENDMENT TO THE CITY OF KEY WEST,  
 FLORIDA,  
 LAND DEVELOPMENT REGULATIONS  
 ADOPTED BY CITY OF KEY WEST, FLORIDA,  
 ORDINANCE NO. 19-18

**FINAL ORDER**  
**APPROVING CITY OF KEY WEST ORDINANCE NO.**  
**19-18**

The Department of Economic Opportunity (“Department”) hereby issues its Final Order, pursuant to subsection 380.05(6), Florida Statutes, approving the requested changes to land development regulations (“LDRs”) adopted by the City of Key West, Florida (“City”) by Ordinance No. 19-18 (“Ordinance”).

**FINDINGS OF FACT**

1. The City is designated as an area of critical state concern by Rule 28-36.002, Florida Administrative Code.
2. The Ordinance was adopted by the City on August 13, 2019, and rendered to the Department on September 13, 2019.
3. The Ordinance amends Chapter 122 of the City of Key West Code of Ordinances (“Code”) to modify the rainwater catchment system criteria requirement for an allocation award from the BPAS system. The Ordinance reduces the minimum number of gallons of water that rainwater catchment systems must be able to hold when constructed in new buildings. The Ordinance also specifies that appropriate precautions must be taken if the cistern will be used for drinking water and provides criteria for which an exemption for the rainwater catchment requirement may be granted.

**CONCLUSIONS OF LAW**

4. Any LDR for the City may be amended by the City, but the amendment becomes effective only upon approval by the Department within 60 days after receipt. § 380.05(6), Fla. Stat.
5. “Land development regulations” include local zoning, subdivision, building, and other regulations controlling the

development of land. § 380.031(8), Fla. Stat. The regulations amended by the Ordinance are land development regulations.

6. The Ordinance is consistent with the City’s Comprehensive Plan generally, as required by section 163.3177(1), Florida Statutes, and specifically, with Policy 6-1.2.4 and Policy 6-1.2.5.

7. LDRs enacted, amended, or rescinded within an area of critical state concern must be consistent and in compliance with the principles for guiding development for that area. *See* § 380.05(6), Fla. Stat. The Principles for Guiding Development for the City are set forth in Rule 28-36.003, Florida Administrative Code.

8. The Ordinance is consistent and in compliance with the Principles for Guiding Development for the City as a whole, and specifically furthers the following principles:

- (1)(a) Strengthen local government capabilities for managing land use and development.
- (f) Enhancing natural scenic resources, promoting the aesthetic benefits of the natural environment, and ensuring that development is compatible with the unique historic character of the Florida Keys.

(l) Making available adequate affordable housing for all sectors of the population of the Florida Keys.

WHEREFORE, IT IS ORDERED that the Department finds that Ordinance No. 19-18 is consistent and in compliance with the City’s Comprehensive Plan and Principles for Guiding Development for the City and is hereby **APPROVED**.

This Final Order becomes effective 21 days after publication in the Florida Administrative Register unless a petition is timely filed as described in the Notice of Administrative Rights below. DONE AND ORDERED in Tallahassee, Florida.

*/s/James D. Stansbury*, James D. Stansbury, Bureau Chief, Bureau of Community Planning and Growth  
 Department of Economic Opportunity

**NOTICE OF ADMINISTRATIVE RIGHTS**

ANY PERSON WHOSE SUBSTANTIAL INTERESTS ARE AFFECTED BY THIS ORDER HAS THE OPPORTUNITY FOR AN ADMINISTRATIVE PROCEEDING PURSUANT TO SECTION 120.569, FLORIDA STATUTES, BY FILING A PETITION.

A PETITION MUST BE FILED WITH THE AGENCY CLERK OF THE DEPARTMENT OF ECONOMIC OPPORTUNITY WITHIN 21 CALENDAR DAYS OF THE DATE OF FILING OF THE FINAL ORDER AS INDICATED ON THE CERTIFICATE OF SERVICE. A PETITION IS FILED WHEN IT IS RECEIVED BY:

AGENCY CLERK, DEPARTMENT OF ECONOMIC OPPORTUNITY, OFFICE OF THE GENERAL COUNSEL, 107 EAST MADISON ST., MSC 110, TALLAHASSEE, FLORIDA 32399-4128, FAX (850)921-3230, AGENCY.CLERK@DEO.MYFLORIDA.COM.

YOU WAIVE THE RIGHT TO ANY ADMINISTRATIVE PROCEEDING IF YOU DO NOT FILE A PETITION WITH THE AGENCY CLERK WITHIN 21 CALENDAR DAYS OF THE DATE OF THE FILING OF THE FINAL ORDER.

FOR THE REQUIRED CONTENTS OF A PETITION CHALLENGING AGENCY ACTION, REFER TO SUBSECTIONS 28-106.104(2), 28-106.201(2), AND SECTION 28-106.301, FLORIDA ADMINISTRATIVE CODE.

DEPENDING ON WHETHER OR NOT MATERIAL FACTS ARE DISPUTED IN THE PETITION, A HEARING WILL BE CONDUCTED PURSUANT TO EITHER SECTION 120.569 AND SUBSECTION 120.57(1), FLORIDA STATUTES, OR SECTION 120.569 AND SUBSECTION 120.57(2), FLORIDA STATUTES.

PURSUANT TO SECTION 120.573, FLORIDA STATUTES, AND CHAPTER 28, PART IV, FLORIDA ADMINISTRATIVE CODE, YOU ARE NOTIFIED THAT MEDIATION IS NOT AVAILABLE.

**CERTIFICATE OF FILING AND SERVICE**

I HEREBY CERTIFY that the original of the foregoing Final Order has been filed with the undersigned designated Agency Clerk, and that true and correct copies have been furnished to the following persons by the methods indicated this 8<sup>th</sup> day of November 2019.

*/s/Janay Lovett*, Agency Clerk, Department of Economic Opportunity, 107 East Madison Street, MSC 110, Tallahassee, FL 32399-4128

**By U.S. Mail:**

The Honorable Teri Johnston, Mayor, City of Key West, P.O. Box 1409, Key West, Florida 33041-1409

Cheri Smith, City Clerk, City of Key West, P.O. Box 1409, Key West, Florida 33041-1409

Patrick Wright, Director, City of Key West Planning Department, P.O. Box 1409, Key West, Florida 33041-1409

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**Section XIII**  
**Index to Rules Filed During Preceding**  
**Week**

NOTE: The above section will be published on Tuesday beginning October 2, 2012, unless Monday is a holiday, then it will be published on Wednesday of that week.

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