

payments is denied. The party having the burden shall establish his/her position, by a preponderance of evidence, to the satisfaction of the hHearings officer.

~~(2)~~(3) When the hHearing involves medical issues such as those concerning a diagnosis, an examining physician's report, or a Medical Review Team's decision, if the hHearings officer considers it necessary, a medical assessment other than that of the person or persons involved in making the original decision shall be obtained at aAgency expense and made a part of the record.

Specific Authority ~~409.285, 120.53, 20.05, 409.026~~ FS. Law Implemented ~~409.285, 120.53, 120.57, 120.58~~ FS., ~~7 CFR 271.1(e), 45 CFR 205.10,~~ History—New 5-17-78, Formerly 10-2.60, 10-2.060, Amended.

NAME OF PERSON ORIGINATING PROPOSED RULE:

John Pritchard

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE:

Guiseppe Betta

DATE PROPOSED RULE APPROVED BY AGENCY HEAD:

June 5, 2000

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW:

October 8, 1999

Section III
Notices of Changes, Corrections and Withdrawals

DEPARTMENT OF INSURANCE

RULE NO.: RULE TITLE:
4-123.002 Procedures

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to form DI4-363 as proposed in the proposed rule in accordance with subparagraph 120.54(3)(d)l., Florida Statutes, published in Vol. 25, No. 33, August 20, 1999, of the Florida Administrative Weekly:

The form was changed to correct spelling errors and to conform more closely with the statutes to be implemented.

The remainder of the rule reads as previously published.

DEPARTMENT OF INSURANCE

RULE NOS.: RULE TITLES:
4-136.001 Purpose
4-136.002 Foreign Insurers Filing for a Certificate of Authority
4-136.003 Foreign and Alien Insurers Filing for a Certificate of Authority for Property and Casualty
4-136.004 Surplus Lines
4-136.005 Foreign and Alien Life and Accident and Health Insurers
4-136.006 Domestic Insurers Filing for an Application for Permit

4-136.007 Applications for Permit Submitted for Domestic Assessable Mutual Insurers
4-136.008 Permit for Domestic Property and Casualty Insurers
4-136.009 Application for Permit, Domestic Captive Insurer
4-136.010 Permit for Domestic Life, Accident and Health
4-136.011 Domestic Insurers Filing for a Certificate of Authority
4-136.012 Forms Adopted
4-136.015 Procedure to Amend an Existing Certificate of Authority to Add a New Line of Business Purpose
4-136.030 Purpose
4-136.031 Registration as a Purchasing Group
4-136.033 Restriction on Insurance Purchased by Purchasing Groups

NOTICE OF CHANGE

Notice is hereby given that changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., Florida Statutes, published in Vol. 26, No. 8, February 25, 2000, of the Florida Administrative Weekly: Due to comments and the workshop and some JAPC concerns the rule has been changed to read:

RULE CHAPTER 4-136

APPLICATION PROCEDURES FOR COMPANIES

SEEKING TO DO BUSINESS IN FLORIDA

PART I APPLICATION PROCEDURES

4-136.001 Purpose.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.401, 624.404, 624.462, 624.466, 626.913, 628.051, 628.6011, 629.081, 629.091 FS. History—New 2-26-92, Repealed.

4-136.002 Foreign and Alien Insurers Filing for a Certificate of Authority.

All foreign entities seeking a any of the certificates of authority ~~specified in 4-136.001~~ shall comply with the requirements of sections 624.404, 624.413 and related Florida Statutes, and shall submit the following ~~common~~ forms:

~~(1) Form DI4-841, "Invoice Request for Payment of Application Fees," rev. 08/91;~~

~~(1)(2) Form DI4-144, "Service of Process Consent & Agreement," rev. 1/97 "Consent and Agreement in re Service of Process Under the Laws of Florida," rev. 11/90;~~

~~(3) Form DI4-514, "Resolution Form," rev. 11/90;~~

~~(4) Form DI4-414, "Paid Representative Registration," rev. 6/89;~~

~~(5) Form DI4-516, "Insurance Holding Company System Registration Statement," rev. 11/90;~~

~~(6) Form DI4-843, "Florida Comprehensive Health Association Subscription Agreement," rev. 5/91;~~

~~(7) Form DI4-844, "Management Information," rev. 10/91;~~

~~(2)(8) Form DI4-422, "Biographical Statement and Affidavit," rev. 10/26/98; 11/90; and~~

~~(3)(9) Form DI4-450, "Authority For Release of Information," rev. 5/00 8/91;~~

~~(4) Form DI4-884, "Application for Certificate of Authority Foreign and Alien Insurer," rev. 2/00;~~

~~(5) Form DI4-881, "Invoice, Application for Certificate of Authority," rev. 10/97;~~

~~(6) Form DI4-903, "Invoice, Request for Payment of Fingerprint Charges," rev. 4/97;~~

~~(7) Form DI4-887, "Application for Certificate of Authority to Conduct Business in the State of Florida," rev. 9/98;~~

~~(8) Form DI4-901, "Life, Accident and Health Insurers, Lines of Business by Company Code," rev. 5/91;~~

~~(9) Form DI4-877, "Property and Casualty Insurers, Lines of Business by Company Code," rev. 11/05/99;~~

~~(10) Form DI4-896, "Life, Accident, and Health Insurance Company Pro Forms (Pages 1-4)," rev. 11/98;~~

~~(11) Form DI4-896, "Property & Casualty Insurance Company Pro Forms (Pages 5-22)," rev. 11/98;~~

~~(12) Form DI4-888, "Disclosure Form Property and Casualty Insurers Only," rev. 4/97;~~

~~(13) Form DI4-889, "Certification, Property and Casualty Insurers Only," rev. 4/97;~~

~~(14) Form DI4-1301, "Subscription Agreement Form," rev. 5/99;~~

~~(15) Form DI4-1298, "Management Information Form," rev. 4/97;~~

~~(16) An investigative report in accordance with the instructions on Form DI4-905, "Instructions Investigative Reports," rev. 6/99.~~

~~(17) Form DI4-938, "Fingerprint Card Instructions," rev. 7/99; and~~

~~(18) Form DI4-1389, "NAIC Company Code Application," rev. 5/00.~~

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.407, 624.413, 624.422, 624.501, 626.7451(11) FS. History-New 2-26-92, Amended _____.

4-136.003 Foreign and Alien Insurers Filing for a Certificate of Authority for Property and Casualty.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.413, 624.422 FS. History-New 2-26-92, Repealed _____.

4-136.004 Surplus Lines.

Applications submitted as an Insurer under Florida's Surplus Lines Law, pursuant to section 626.913, Florida Statutes, shall contain all of the following forms:

(1) Form DI4-915 ~~DI4-815~~, "Application as an Insurer Under Florida's Surplus Lines Law," rev. 12/97 ~~4/91~~;

(2) Form DI4-916 ~~DI4-816~~, "Instructions, Sections I-IV," rev. 5/99 ~~4/91~~;

(3) Form DI4-917 ~~DI4-817~~, "Required Filings Check List, Sections I-IV," rev. 5/98 ~~4/91~~;

~~(4) Form DI4-841, "Invoice, Request For Payment of Application Fees," rev. 8/91;~~

~~(4)(5) Form DI4-144, "Service Of Process Consent & Agreement," rev. 1/97 "Consent and Agreement In Re Service of Process Under The Laws of Florida," rev. 11/90;~~

~~(6) Form DI4-514, "Resolution Form," rev. 11/90;~~

~~(7) Form DI4-414, "Paid Representative Registration," rev. 6/01/89;~~

~~(8) Form DI4-844, "Management Information," rev. 10/91;~~

~~(5) Form DI4-903, "Invoice, Request for Payment of Fingerprint Charges," rev. 4/97;~~

~~(6) Form DI4-877, "Property and Casualty Insurers, Lines of Business by Company Code," rev. 11/05/99;~~

~~(7) Form DI4-422, "Biographical Statement and Affidavit," rev. 10/26/98;~~

~~(8) Form DI4-450, "Authority for Release of Information," rev. 5/00;~~

~~(9) An investigative report in accordance with the instructions on Form DI4-905, "Instructions For Furnishing Background Investigative Reports," rev. 6/99.~~

~~(10) Form DI4-938, "Fingerprint Card Instructions," rev. 7/99; and~~

~~(12) Form DI4-1298, "Management Information Form," rev. 4/97.~~

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.422, 624.501, 626.913, 626.918 FS. History-New 2-26-92, Amended _____.

4-136.005 Foreign and Alien Life and Accident and Health Insurers.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.413, 624.422, 624.501 FS. History-New 2-26-92, Repealed _____.

4-136.006 Domestic Insurers Filing for an Application for Permit.

~~(+)~~ All domestic insurers filing an Application for Permit, pursuant to Chapter 628, Florida Statutes, for the following: Domestic Property and Casualty Insurers, Title Insurers, and Life and Health Insurers, pursuant to section 628.051, Florida Statutes; Domestic Assessable Mutual Insurers, pursuant to section 628.051, Florida Statutes; and Domestic Captive Insurers, pursuant to Chapter 628, Part III, as referenced in 4-136.001, above, shall submit the following common forms:

~~(1)(a)~~ Form DI4-903, "Invoice, Request For Payment of Fingerprint Charges," rev. 4/97 ~~5/91~~;

~~(2)(b)~~ Form DI4-516, "Insurance Holding Company System Registration Statement," rev. 4/97 ~~11/90~~;

~~(e) Form DI4-414, "Paid Representative Registration," rev. 6/89;~~

~~(3)(d) Form DI4-422, "Biographical Statement and Affidavit," rev. 10/26/98 11/90;~~

~~(4)(e) Form DI4-450, "Authority For Release of Information," rev. 5/00 8/91;~~

~~(5)(f) An investigative report in accordance with the instructions on Form DI4-905, "Instructions For Furnishing Background Investigative Reports Equifax Report", or a similar report, rev. 6/99 5/91;~~

~~(g) Form DI4-843, "Florida Comprehensive Health Association Agreement," rev. 5/91;~~

~~(6)(h) Form DI4-844, "Management Information," rev. 4/97; 10/91; and~~

~~(7)(i) Form DI4-938, "Fingerprint Card Instructions," rev. 7/99; 4/91.~~

~~(8) Form DI4-872, "Application for Permit Domestic Insurer," rev. 2/00;~~

~~(9) Form DI4-875, "Invoice, Domestic Insurer Application for Permit," rev. 4/97;~~

~~(10) Form DI4-876, "Application for Permit to Form a Domestic Insurer," rev. 4/97;~~

~~(11) Form DI4-901, "Life, Accident and Health Insurers Lines of Business by Company Code Form," rev. 5/91;~~

~~(12) Form DI4-877, "Property and Casualty Insurers Lines of Business by Company Code Form," rev. 11/05/99;~~

~~(13) Form DI4-896, "Life, Accident, and Health Insurance Company Pro Formas (Pages 1-4)," rev. 11/98; and~~

~~(14) Form DI4-896, "Property & Casualty Insurance Company Pro Formas (Pages 5-22)," rev. 11/98.~~

~~(2) The Department may request an updated Biographical Affidavit, Authority for Release of Information, Equifax or a similar report and fingerprint card on an officer, director, incorporator and those owning 10% or more, or on those who will be associated in the formation of the insurer, for each application submitted to do business in Florida.~~

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, ~~624.407~~, 624.413, 624.422, 624.501, ~~626.7451(11)~~, 628.051 FS. History–New 2-26-92, Amended.

4-136.007 Applications for Permit Submitted for Domestic Assessable Mutual Insurers.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.413, 624.501, 628.051 FS. History–New 6-4-92, Repealed.

4-136.008 Permit for Domestic Property and Casualty Insurers.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.413, 624.422, 624.501, 628.051 FS. History–New 2-26-92, Repealed.

4-136.009 Application for Permit, Domestic Captive Insurer.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.413, 624.422, 624.501, 628.905 FS. History–New 2-26-92, Repealed.

4-136.010 Permit for Domestic Life, Accident and Health Insurers.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.413, 624.422, 624.501, 628.051 FS. History–New 2-26-92, Repealed.

4-136.011 Domestic Insurers Filing for a Certificate of Authority.

(1) All domestic entities seeking a certificate of authority, pursuant to sections 624.466, 628.6011, or 628.051, or to Chapter 628, Part I, or to Chapter 629, Florida Statutes, as ~~referenced in Rule 4-136.001~~, shall submit the following ~~common~~ forms:

(a) Form DI4-903, "Invoice, Request For Payment of Fingerprint Charges," rev. ~~4/97 5/91~~;

(b) Form DI4-883, "Certificate of Designation, Registered Agent/Registered Office," rev. ~~4/00 5/91~~;

(c) Form DI4-144, "Service of Process Consent & Agreement," rev. ~~1/97 "Consent and Agreement in Re Service of Process," rev. 11/90~~;

~~(d) Form DI4-514, "Resolution Form," rev. 11/90;~~

~~(d)(e) Form DI4-516, "Insurance Holding Company System Registration Statement," rev. 4/97 11/90;~~

(e)(f) Form DI4-422, "Biographical Statement and Affidavit," rev. ~~10/26/98 11/90~~;

(f)(g) Form DI4-450, "Authority For Release of Information," rev. ~~5/00 8/91~~;

~~(g)(h) An investigative report in accordance with the instructions on Form DI4-905, "Instructions For Furnishing Background Investigative Reports Equifax Report", or a similar report, rev. 6/99 5/91;~~

~~(h)(i) Form DI4-938, Fingerprint cards in accordance with the instructions on Form DI4-938, "Fingerprint Card Instructions," rev. 7/99 4/91; and~~

~~(i)(j) Form DI4-844, "Management Information Form," rev. 4/97 10/91;~~

(j) Form DI4-878, "Application For Certificate of Authority Domestic Insurer," rev. ~~2/00~~;

(k) Form DI4-1299, "Invoice Domestic Insurer Application for Certificate of Authority," rev. ~~4/97~~;

(l) Form DI4-882, "Application For Domestic Certificate of Authority to Conduct Business in the State of Florida," rev. ~~4/97~~;

(m) Form DI4-901, "Life, Accident and Health Insurers Lines of Business by Company Code," rev. ~~5/91~~;

(n) Form DI4-877, "Property and Casualty Insurers Lines of Business by Company Code," rev. ~~11/05/99~~;

(o) Form DI4-896, "Life, Accident, and Health Insurance Company Pro Formas (Pages 1-4)," rev. 11/98;

(p) Form DI4-896, "Property & Casualty Insurance Company Pro Formas (Pages 5-22)," rev. 11/98;

(q) Form DI4-1301, "Subscription Agreement Form," rev. 5/99; and

(r) Form DI4-1389, "NAIC Company Code Application Form," rev. 5/00.

~~(2) Applications submitted for a Certificate of Authority Domestic Property and Casualty Insurers shall contain all of the following forms pursuant to Section 624.404, Florida Statutes, in addition to the common forms specified in subsection (1), above:~~

~~(a) Form DI4-878, "Application for Certificate of Authority Domestic Property and Casualty Insurer," rev. 4/91;~~

~~(b) Form DI4-879, "Instructions, Sections I-IV," rev. 4/91;~~

~~(c) Form DI4-880, "Required Filings Check List, Sections I-IV," rev. 4/91;~~

~~(d) Form DI4-881, "Invoice, Domestic Property and Casualty Insurer," rev. 4/91;~~

~~(e) Form DI4-882, "Application for License to Conduct Business in the State of Florida," rev. 5/91; and~~

~~(f) Form DI4-896, "Preforms (pages 1-18)," rev. 5/91.~~

~~(2)(3) Applications submitted for Certificate of Authority as a Commercial Self-Insurance Fund shall contain all of the following forms pursuant to section 624.462, Florida Statutes; in addition to the common forms specified in subsection (1), above:~~

~~(a) Form DI4-845, "Application For Certificate of Authority, Commercial Self-Insurance Fund," rev. 4/95 5/91;~~

~~(b) Form DI4-846, "Instructions, Sections I-IV," rev. 5/91;~~

~~(b)(e) Form DI4-847, "Required Filings Check List, Sections I-IV," rev. 5/91;~~

~~(c)(d) Form DI4-848, "Invoice, Commercial Self-Insurance Fund," rev. 7/92 5/91;~~

~~(d)(e) Form DI4-849, "Application for License to Conduct Business in the State of Florida," rev. 5/91;~~

~~(e)(f) Form DI4-869, "Consent and Agreement in re Service of Process for Commercial Self-Insurance Fund," rev. 5/91;~~

~~(f)(g) Form DI4-870, "Resolution Form for Commercial Self-Insurance Fund," rev. 5/91;~~

~~(g)(h) Form DI4-871, "Bond Form," rev. 5/91; and~~

~~(h)(i) Form DI4-936, "Management Information, Complete Listing of Administrators, Trustee of Funds and Trustees of Sponsors," rev. 5/91;~~

~~(i) Form DI4-903, "Invoice, Request for Payment of Fingerprint Charges," rev. 4/97;~~

~~(j) Form DI4-877, "Property and Casualty Insurers, Lines of Business by Company Code," rev. 11/05/99;~~

~~(k) Form DI4-896, "Property & Casualty Insurance Company Pro Formas (Pages 5-22)," rev. 11/98;~~

(l) Form DI4-422, "Biographical Statement and Affidavit," rev. 10/26/98;

(m) Form DI4-450, "Authority for Release of Information," rev. 5/00;

(n) An investigative report in accordance with the instructions on Form DI4-905, "Instructions for Furnishing Background Investigative Reports," rev. 6/99; and

(o) Form DI4-938, "Fingerprint Card Instructions," rev. 7/99.

~~(3)(4) Applications submitted for a Certificate of Authority of Domestic Reciprocal Insurers, pursuant to Chapter 629, Florida Statutes, shall submit the following forms in addition to the common forms specified in subsection (1), above:~~

~~(a) Form DI4-907, "Application for Certificate of Authority Domestic Reciprocal Insurer," rev. 4/95 5/91;~~

~~(b) Form DI4-908, "Instructions, Sections I-IV," rev. 4/95 5/91;~~

~~(c) Form DI4-909, "Required Filings Check List, Sections I-IV," rev. 4/95 5/91;~~

~~(d) Form DI4-910, "Invoice, Domestic Reciprocal Insurer," rev. 7/92 5/91;~~

~~(e) Form DI4-911, "Application for License to Conduct Business in the State of Florida," rev. 5/91;~~

~~(f) Form DI4-912, "Consent and Agreement in Re Service of Process, Reciprocal Insurers," rev. 5/91;~~

~~(g) Form DI4-843, "Florida Comprehensive Health Association Subscription Agreement," rev. 5/91;~~

~~(h) Form DI-914, "Complete Listing of All Advisory Committee Members and Subscribers," rev. 5/91; and~~

~~(i) Form DI-937, "Complete Listing of All Attorney-In-Fact Officers, Directors and Shareholders," rev. 5/91;~~

(j) Form DI4-903, "Invoice, Request for Payment of Fingerprint Charges," rev. 4/97;

(k) Form DI4-877, "Property And Casualty Insurers Lines of Business by Company Code," rev. 11/05/99;

(l) Form DI4-913, "Resolution Form, Reciprocal Insurer," rev. 5/91;

(m) Form DI4-896, Pages 5-22 for "Property & Casualty Insurers," rev. 11/98;

(n) Form DI4-1389, "NAIC Company Code Application Form," rev. 5/00;

(o) Form DI4-422, "Biographical Statement and Affidavit," rev. 10/26/98;

(p) Form DI4-450, "Authority for Release of Information," rev. 5/00;

(q) Form DI4-938, "Fingerprint Card Instructions," rev. 7/99; and

(r) Form DI4-905, "Instructions for Furnishing Background Investigative Reports," rev. 6/99.

(5) Applications submitted for a Certificate of Authority of Domestic Life, Accident and Health Insurers, pursuant to Chapter 624, Florida Statutes, shall include all of the following forms in addition to the common forms specified in subsection (1), above:

(a) ~~Form DI4-832, "Application For Certificate of Authority Domestic Life, Accident and Health Insurers," rev. 8/91;~~

(b) ~~Form DI4-833, "Instructions, Sections I-IV," rev. 8/91;~~

(c) ~~Form DI4-834, "Required Filings Check List, Sections I-IV," rev. 8/91;~~

(d) ~~Form DI4-835, "Invoice, License Tax and Filing Fee," rev. 8/91;~~

(e) ~~Form DI4-836, "Application For License to Conduct Business in the State of Florida," rev. 5/91; and~~

(f) ~~Form DI4-843, "Florida Comprehensive Health Association Subscription Agreement," rev. 5/91.~~

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, ~~624.407, 624.411, 624.413, 624.414(1), 624.422, 624.466, 624.501, 624.6488(1), 625.306, 625.502, 628.041, 628.051, 628.061, 628.071, 628.081, 628.091, 628.121, 628.051, 628.161, 628.171, 628.221, 628.231, 628.251, 628.261, 628.451, 628.461, 628.4615, 628.471, 628.6011, 629.071, 629.081, 629.091, 629.101, 629.121, 629.131, 629.181, Part I, Chs. 628, 629~~ FS. History—New 2-26-92, Amended _____.

4-136.012 Forms Adopted.

(1) All the forms listed in rules 4-136.002 through 4-136.011 are hereby adopted and incorporated by reference. All the forms may be obtained from and shall be submitted to the Department of Insurance, Division of Insurer Services Support, Applications Coordination Section, Larson Building, 200 East Gaines Street, Tallahassee, Florida 32399-0327 ~~0300~~.

(2) An original and one copy shall be filed for all applications referenced in rules 4-136.002 through 4-136.011. The department may request that all applications and supporting information be provided to the department in a computer readable format as specified by the department.

Specific Authority 624.308 FS. Law Implemented 624.307(1), 624.34, 624.401, 624.404, 624.413, 624.422, 624.462, 624.466, 624.501, 626.913, 628.6011, 628.051, ~~628.061~~ Part I, Chs. 628, 629 FS. History—New 2-26-92, Amended _____.

4-136.015 Procedure to Amend an Existing Certificate of Authority to Add a New Line of Business.

(1) The purpose of this rule is to establish a procedure for insurers to amend their certificates of authority by adding a new line of business. Since the addition of any new line of business to a company's certificate of authority may impact the company's surplus and/or writing ratios, any such request to amend an existing certificate will be carefully evaluated by applying current standards required of an insurer seeking a certificate of authority from this state.

(2) This rule applies to all authorized insurers, as defined in section 624.09, Florida Statutes.

(3) Any insurer seeking to add a new line of insurance to an existing certificate of authority shall submit all of the following applicable forms in writing:

(a) Form DI4-1339, "Application For Adding A New Line Of Business," rev. 9/99; Verification of three years of satisfactory operation in the line of insurance to be added. The Department may waive the 3-year requirement if the foreign or alien insurer or exchange:

1. ~~Has operated successfully and has a minimum capital and surplus of \$5 million and is in compliance with Section 624.408(1), Florida Statutes; or~~

2. ~~Is the wholly owned subsidiary of an insurer which is an authorized insurer in this state; or~~

3. ~~Is the successor in interest through merger or consolidation of an authorized insurer; or~~

4. ~~Provides a product or service not readily available to the consumers of this state;~~

(b) Form DI4-1340, "Application For Adding A New Line Of Business," rev. 9/96; Any other information which is reasonably necessary to evaluate the proposed amendment.

(c) Form DI4-1341, "Invoice, Request for Certificate of Compliance for Amended Certificate of Authority," rev. 9/96;

(d) Form DI4-877, "Property and Casualty Insurers Lines of Business by Company Code," rev. 11/05/99;

(e) Form DI4-901, "Life, Accident and Health Insurers Classifications and Code Numbers," rev. 5/91;

(f) Form DI4-843, "Florida Comprehensive Health Association (FCHA) Subscription Agreement," rev. 5/91; and

(g) Form DI4-1093, "State of Florida Form for Small Employer Carrier's Application to Become a Risk Assuming Carrier or a Reinsuring Carrier," rev. 9/95.

(4) The Department shall not authorize the addition of any lines of insurance to an insurer's existing certificate of authority unless evidence is presented satisfactory to the Department that authorization of the additional lines of insurance would be in the best interests of the financial solvency of the insurer and in the best interests of the policyholders.

(5) The forms in subsection (1) above are hereby adopted and incorporated by reference. All forms may be obtained from and shall be submitted to the Applications Coordination Section, Division of Insurer Services, Department of Insurance, 200 East Gaines Street, Tallahassee, FL 32399-0326.

Specific Authority 624.308(1) FS. Law Implemented 624.09, 624.307(1), 624.404, 624.408, 624.413, 624.414, 624.416(4), 624.501(20), 627.6488(1) FS. History—New 3-30-92, Amended 9-2-96, _____.

PART II PURCHASING GROUPS AND RISK RETENTION GROUPS

4-136.030 Purpose.

Specific Authority 624.308, 627.954 FS. Law Implemented 624.307(1), Part XIX, Chapter 627 FS. History--New 1-30-91, Formerly 4-107.001, ~~Repealed~~

4-136.031 Registration as a Purchasing Group.

(1) All entities seeking ~~registration~~ ~~licensure~~ as a purchasing group shall comply with the requirements of section 627.948, Florida Statutes, and shall submit:

(a) Form DI4-515, ~~“Purchasing Group – Notice and Registration,” rev. 10/07/99; “Application for Registration as a Purchasing Group with Addendum,” rev. 11-90;~~

(b) Form DI4-144B, ~~“Service of Process Consent & Agreement,” rev. 1/97; “Appointment of Attorney to Accept Service,” rev. 11-90;~~ and

(c) ~~All purchasing groups shall comply with the information contained in Form DI4-515, “Purchasing Group – Notice and Registration,” rev. 10/07/99 and submit the following forms where applicable: Form DI4-514, “Resolution Form,” rev. 11-90.~~

1. ~~Form DI4-903, “Invoice, Request for Payment of Fingerprint Charges,” rev. 4/97;~~

2. ~~Form DI4-422, “Biographical Statement and Affidavit,” rev. 10/26/98;~~

3. ~~Form DI4-450, “Authority for Release of Information,” rev. 5/00;~~

4. ~~Form DI4-905, “Instructions for Furnishing Background Investigative Reports,” rev. 6/99; and~~

5. ~~DI4-938, “Fingerprint Card Instructions,” rev. 7/99.~~

(2) In addition to the information required on the forms in (1) above, the entity shall:

(a) Identify all other states in which the group ~~is currently registered~~ ~~intends to do business;~~

(b) Specify the method by which, and the person or persons, if any, through whom insurance will be offered to its members whose risks are resident or located in this state; and

(c) Provide such other information as is necessary for the Department to determine whether the persons through whom insurance will be offered meet the standard set forth in section 626.611(14), Florida Statutes.

(3) During the pendency of the application, if any of the information submitted in response to the requirements of this rule change, the entity shall notify the Department of the change within ten days of the change.

(4) The forms in subsection (1) above are hereby adopted and incorporated by reference. All forms may be obtained from and shall be submitted to the Applications Coordination Section, Division of Insurer Services, Department of Insurance, ~~Larson Building,~~ 200 East Gaines Street, Tallahassee, FL 32399-~~03260300~~.

Specific Authority 624.308, 627.954 FS. Law Implemented 624.307(1), 624.307(3), 624.318, 624.321, 626.611(14), 627.948 FS. History--New 1-30-91, Formerly 4-107.002, Amended 9-19-94, _____.

4-136.033 Restrictions on Insurance Purchased by Purchasing Groups.

(1) A purchasing group which obtains liability insurance from an insurer not admitted in this state or a risk retention group shall inform each of the members of such group which have a risk resident or located in this state that such risk is not protected by an insurance insolvency guaranty fund in this state, and that such risk retention group or such insurer may not be subject to all insurance laws and rules of this state.

~~(2) No purchasing group may purchase insurance providing for a deductible or self-insured retention applicable to the group as a whole; however, coverage may provide for a deductible or self-insured retention applicable to individual members.~~

~~(2)(3)~~ Purchases of insurance by purchasing groups are subject to the same standards regarding aggregate limits which are applicable to all purchases of group insurance.

Specific Authority 624.308, 627.954 FS. Law Implemented 624.307(1), 627.945(1), 627.947 FS. History--New 1-30-91, Formerly 4-107.004, Amended _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Joan E. Hendrix, Senior Management Analyst I, Division of Insurer Services, Department of Insurance

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Kevin McCarty, Deputy Director, Division of Insurer Services, Department of Insurance

DATE PROPOSED RULE APPROVED BY THE AGENCY HEAD: November 17, 1999

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 24, 1999

DEPARTMENT OF INSURANCE

RULE NOS.:	RULE TITLES:
PART III	SMALL EMPLOYER HEALTH CARE ACCESS
4-149.030	Purpose
4-149.031	Applicability and Scope; Penalties
4-149.032	Requirement to Insure Entire Group
4-149.033	Consideration of Industry
4-149.034	Qualifying Previous and Qualifying Existing Coverage
4-149.037	Calculation of Premium Rates
4-149.038	Employee Health Care Access Act Annual and Quarterly Statement Reporting Requirement
4-149.039	Designation of Election to Become a Risk-Assuming or Reinsuring Carrier Under Section 627.6699 Florida Statutes the Employee Health Care Access Act

- 4-149.040 Change of Status of Small Employer Carrier's Election to Become Risk-Assuming Carrier or Reinsuring Carrier
- 4-149.041 Marketing Communication Material and Marketing Guidelines
- 4-149.043 Small Employer Health Reinsurance Program
- PART IV SELF-FUNDED HEALTH BENEFITS PLANS FOR PUBLIC OFFICERS AND EMPLOYEES
- 4-149.051 Purpose
- 4-149.052 Establishing a Self-Funded Health Benefit Plan
- 4-149.053 On-Going Review of the Self-Funded Health Benefit Plan
- PART VII SMALL EMPLOYER HEALTH CARE ACCESS
- 4-149.130 Purpose
- 4-149.131 Applicability and Scope
- 4-149.132 Calculation of Premium Rates
- 4-149.133 Marketing Communication Material and Marketing Guidelines
- PART VIII SELF-FUNDED HEALTH BENEFIT PLANS FOR PUBLIC OFFICERS AND EMPLOYEES
- 4-149.150 Purpose
- 4-149.151 Establishing a Self-Funded Health Benefit Plan
- 4-149.152 On-Going Review of the Self-Funded Health Benefit Plan

NOTICE OF WITHDRAWAL

Notice is hereby given that the above rule(s), as noticed in published in Vol. 23, No. 45, November 7, 1997, and Vol. 24, No. 46, November 13, 1998, of the Florida Administrative Weekly, with notices of change published in Vol. 24, No. 20, May 15, 1998; and Vol. 24, No. 31, July 31, 1998 and Vol. 26, No. 12, March 24, 2000, and Vol. 26, No. 22, June 2, 2000, have been withdrawn.

REGIONAL TRANSPORTATION AUTHORITIES

Tri-County Commuter Rail Authority
 RULE NO.: RULE TITLE:
 30C-2.002 Organization

NOTICE OF CORRECTION

Notice is hereby given that due to a scrivener's error, the following correction has been made to proposed Rule 30C-2.002(4)(e), published in Vol. 26, No. 23, June 9, 2000, issue of the Florida Administrative Weekly. The correction is made in accordance with subparagraph 120.54(3)(d)1., F.S.

30C-2.002 Organization.
 (4) Specific Authority of the Executive Director.

(e) The Executive Director shall have the authority to enter into a contract awarded by a public procurement unit if both the vendor and the public procurement unit agree to such an award of their contract and the procurement was accomplished under an open and free competitive bid system. The actual award of such a contract shall be made under the provisions contained in this Procurement Code for the award of contracts by the TCRA, and TCRA shall enter into a contract with the vendor.

DEPARTMENT OF CORRECTIONS

RULE NOS.:	RULE TITLES:
33-208.509	Staff Housing-Repairs and Replacements

NOTICE OF CORRECTION

Notice is hereby given that a change to rule 33-208.509 was inadvertently included in the notice of change to be published in the June 23, 2000 issue of the Florida Administrative Weekly. This change is being removed as rule 33-208.509 did not originally appear in the notice of proposed rulemaking which was published in Vol. 26, No. 16, April 21, 2000, issue of the Florida Administrative Weekly.

WATER MANAGEMENT DISTRICTS

St. Johns River Water Management District

RULE NO.:	RULE TITLE:
40C-4.091	Publications Incorporated by Reference

NOTICE OF CHANGE

Notice is hereby given that the following change has been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 26, No. 6, of the February 11, 2000, issue of the Florida Administrative Weekly. The originally published rule proposed amendments to the drainage basin and regional watershed maps in Figure 12.2.8-1 and Appendix M of the Applicant's Handbook: Management and Storage of Surface Waters, which is incorporated by reference in rule 40C-4.091, FAC. The change to the proposed rule retains Lake Jesup as a separate drainage basin and regional watershed, so the proposed amended maps will now have 23 basins/watersheds instead of previously proposed 22 basins/watersheds. This change is mandated by Chapter 00-133, Laws of Florida.

INSERT MAPS – Page 1 of 2
40C-4

INSERT MAPS – Page 2 of 2
40C-4

DEPARTMENT OF HEALTH

Board of Acupuncture

RULE NO.: 64B1-1.003 RULE TITLE: Other Business Involving the Board
 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. 26, No. 19, May 12, 2000, issue of the Florida Administrative Weekly. When changed, Rule 64B1-1.003(6) shall read as follows:

(6) conference calls for which licensing or disciplinary action is agendaed and which exceed one hour in duration; or which are called on an emergency basis.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: William Buckhalt, Executive Director, Board of Acupuncture, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3257

DEPARTMENT OF HEALTH

Board of Clinical Laboratory Personnel

RULE NO.: 64B3-9.012 RULE TITLE: Unlicensed Activity Fee
 NOTICE OF CHANGE

The Board of Clinical Laboratory Personnel gives Notice of Change to the above-referenced rules in response to comments received from the Joint Administrative Procedures Committee. The rule was originally published in Vol. 26, No. 17, April 28, 2000, issue of the Florida Administrative Weekly. When changed, Rule 64B3-9.012 shall read as follows:

64B3-9.012 An unlicensed activity fee of \$5 shall be assessed on the behalf of the Department in addition to the current licensure and renewal fees.

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

DEPARTMENT OF HEALTH

Board of Nursing

RULE NO.: 64B9-2.008 RULE TITLE: Clinical Training

NOTICE OF RESCHEDULING OF PUBLIC HEARING

The Board of Nursing hereby gives notice of the rescheduling of the public hearing with regard to the above-referenced rule. The rule was originally published in Vol. 26, No. 22, of the June 2, 2000, Florida Administrative Weekly, setting forth a hearing date of June 28, 2000. The hearing has been rescheduled and will be held on October 10, 2000, at 4:00 p.m., or as soon thereafter as can be heard, at the Sheraton Hotel, Ft. Lauderdale Airport, 1825 Griffin Road, Ft. Lauderdale, Florida 33004.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dr. Ruth R. Stiehl, Executive Director, Board of Nursing, 4080 Woodcock Drive, Suite 202, Jacksonville, Florida 32207

Any person requiring a special accommodation at this hearing because of a disability or physical impairment should contact the Board's Executive Director at least five calendar days prior to the hearing. If you are hearing or speech impaired, please contact the Board office using the Florida Dual Party Relay System which can be reached at 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

DEPARTMENT OF HEALTH

Division of Environmental Health and Statewide Programs

RULE CHAPTER NO.: 64E-19 RULE CHAPTER TITLE: Rural Hospital Capital Improvement Grant Application Procedures

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to proposed rule 64E-19, FAC., in accordance with subparagraph 120.54(3)(d), F.S., published in the Florida Administrative Weekly, Vol. 26, No. 19 on May 12, 2000. The changes reflect comments received during the public hearing process and upon comments received from the Joint Administrative Procedures Committee. The changes are as follows:

- 64E-19.001(1) Added reference to 216.349, F.S., under Law Implemented
- Form 1432A, page 10 Replaced the word 160 with the word 140.
- Form 1432A, page 15 Remove subtitle STATE FUNDED and the following two paragraphs, include the following sentence under the FINANCIAL AND COMPLIANCE AUDIT REQUIREMENTS section – An audit, performed in accordance with 216.349, F.S., performed by the Auditor General shall satisfy the requirement of this attachment.

P.O. X05593

Section IV Emergency Rules

DEPARTMENT OF INSURANCE

RULE TITLE: Emergency Restrictions and Limitations on
 RULE NO.: 4ER00-1

Construction Materials Mining Activities
SPECIFIC REASONS FOR FINDING AN IMMEDIATE DANGER TO THE PUBLIC HEALTH, SAFETY OR WELFARE: The Department of Insurance hereby states that the following circumstances constitute an immediate danger to the public health, safety, and welfare:

1. CS/SB 772 was enacted by the legislature on May 5, 2000, and became effective on June 14, 2000, upon signature by the Governor. This law designates the State Fire Marshal as the *sole and exclusive authority* to promulgate standards, limits, and regulations regarding the use of explosives in conjunction with construction materials mining activities. Prior to enactment of this law the counties or municipalities established these standards.
2. The bill upon its effective date renders the county and municipal standards null and void.
3. The Department has not been afforded sufficient time to implement rules to replace the previously effective county and municipal standards through the normal rule adoption process.
4. This emergency rule adopts the respective county and municipal standards for a period of 90 days to allow the permanent rulemaking process to occur.
5. The rules relate directly to public safety in that the subject of the regulation is an inherently dangerous activity.

REASONS FOR CONCLUDING THAT THE PROCEDURE USED IS FAIR UNDER THE CIRCUMSTANCES: The Department of Insurance believes that adopting an emergency rule is the fairest method to protect the public in the transition between county or municipal standards and state standards. Standard rulemaking is in progress, giving parties the ability to participate in the rulemaking. The division to the greatest degree possible has crafted the emergency rule in a way that preserves the status quo by maintaining standards equivalent to those previously enacted by local authorities. In jurisdictions where there are no properly enacted standards, the State Fire Marshal will continue to enforce the requirements of Chapter 552, Florida Statutes.

SUMMARY OF THE RULE: This emergency rule adopts the county and municipal standards for a period of 90 days to allow the permanent rulemaking process to occur.

THE PERSON TO BE CONTACTED REGARDING THE EMERGENCY RULE IS: Terry Hawkins, Bureau of Fire Prevention, Division of State Fire Marshal, Department of Insurance, 200 East Gaines Street, Tallahassee, Florida 32399-0342, phone (850)413-3624

THE FULL TEXT OF THE EMERGENCY RULE IS:

4ER00-1 Emergency Restrictions and Limitations on Construction Materials Mining Activities.

(1) The Division of State Fire Marshal adopts the following ordinances which are in effect as of the effective date of section 552.30, Florida Statutes, and which are applicable to the use, handling, and licensure of explosives generally as the standards, limits, and regulations applicable to the use, handling, and licensure of explosives in conjunction with construction materials mining activities as defined in section 552.30, Florida Statutes, conducted within the applicable jurisdiction, except to the extent that ground vibration limits established in such ordinances do not conform with subsection (2) of this rule. Any person or company using explosives in conjunction with construction materials mining activities as defined in section 552.30, Florida Statutes, shall continue to abide by, and be fully and completely bound by, such ordinances of local government in all respects, as if the local government's ordinance regarding the operation and handling of explosives were still in full force and effect:

<u>LOCAL GOVERNMENT</u>	<u>ORDINANCE</u>
<u>Alachua</u>	<u>Code of Ordinances County of Alachua, Florida, Part III Unified Land Development Code, Title 35 Environment, Chapter 352 Surface Mining: Land Reclamation</u>
<u>Broward</u>	<u>Ordinance 97-01 Blasting Ordinance & Policy Blasting Policy 12</u>
<u>Citrus</u>	<u>Part II Citrus County, Florida Code Chapter 66 Natural Resources Sec. 66-1. Mining</u>
<u>City of Miramar</u>	<u>Pre-Blast Meeting Agenda, Sunset Lakes: May 28, 1997; City of Miramar Procedure Manual for Resolution of Blasting Damage Complaints 1/22/97</u>
<u>Collier</u>	<u>Collier County Land Development Code, Division 3.4 Explosives</u>
<u>Dade</u>	<u>Code of Metropolitan Dade County, Florida, Part III Code of Ordinances Chapter 13 Explosives; Ordinance No. 96-45, Section 1, 3-19-96</u>
<u>DeSoto</u>	<u>DeSoto County Ordinance 1999-15 in Section C "Criteria for Operating Permit Issuance, Number 16 "Blasting"</u>
<u>Hamilton</u>	<u>Section 14.7.0 Limerock Mining and Mining Other Than Phosphates</u>
<u>Hardee</u>	<u>2.06.06 Standards</u>
<u>Hernando</u>	<u>Hernando County Ordinance No. 93-13, Hernando County Code of Ordinances Chapter 19</u>