

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

If accommodation for a disability is needed to participate in this activity, please notify Rosaline Beckham, (850)487-1262, Extension 186, or 1(800)955-8771 (TDD), or 1(800)955-8770 (Voice), VIA, Florida Relay Service, at least seven days before the meeting.

Section II Proposed Rules

DEPARTMENT OF BANKING AND FINANCE

Division of Securities and Finance

RULE TITLES:	RULE NOS.:
Mortgage Broker License Renewal and Reactivation	3D-40.043
Mortgage Brokerage Business License and Branch Office License Renewal and Reactivation	3D-40.053
Mortgage Lender License, Mortgage Lender License Pursuant to Saving Clause, and Branch Office Renewal and Reactivation	3D-40.205
Correspondent Mortgage Lender License and Branch Office License Renewal and Reactivation	3D-40.225

PURPOSE AND EFFECT: The purpose of the proposed rule is to address registrations that expire on a Saturday, Sunday or legal holiday. The proposed amendments allow renewals received on the next business day to be considered timely received.

SUMMARY: The proposed amendments provide that if August 31 of the renewal year falls on a Saturday, Sunday, or legal holiday, the renewals received on the next business day will be considered timely received.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: No statement of estimated regulatory cost has been prepared.

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

SPECIFIC AUTHORITY: 494.0011(2), 494.0034(2), 494.0036(2), 494.0064(2) FS.

LAW IMPLEMENTED: 494.0011(2), 494.0032, 494.0034, 494.0036, 494.0064 FS.

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

TIME AND DATE: 10:00 a.m., January 8, 2001

PLACE: Room 550, Fletcher Building, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Rick Morgan, Financial Control Analyst, Room 550, Fletcher Building, 101 East Gaines Street, Tallahassee, Florida 32399-0350, (850)410-9500

THE FULL TEXT OF THE PROPOSED RULES IS:

3D-40.043 Mortgage Broker License Renewal and Reactivation.

(1) No change.

(2) A mortgage broker license that is not renewed as required in subsection (1) prior to September 1 of the renewal year shall revert from active to inactive status. An inactive license may be reactivated within two (2) years after becoming inactive upon payment of the statutory renewal and reactivation fees required by Section 494.0034, F.S., and submission of a completed reactivation form. If August 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(3) No change.

Specific Authority 494.0011(2), 494.0034(2) FS. Law Implemented 494.0034 FS. History--New 11-2-86, Amended 6-23-91, 11-12-91, 9-3-95, 12-12-99, _____.

3D-40.053 Mortgage Brokerage Business License and Branch Office License Renewal and Reactivation.

(1) No change.

(2) A mortgage brokerage business license that is not renewed as required in subsection (1) prior to September 1 of the renewal year shall revert from active to inactive status. An inactive license may be renewed within six (6) months after becoming inactive upon payment of the statutory renewal and reactivation fees required by Section 494.0032, F.S., and submission of a completed reactivation form. If August 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(3) No change.

(4) A mortgage brokerage business branch office license that is not renewed as required in subsection (3) prior to September 1 of the renewal year shall revert from active to inactive status. An inactive branch office license may be renewed within six (6) months after becoming inactive upon payment of the statutory renewal and reactivation fees required by Section 494.0032, F.S., and submission of a completed reactivation form. If August 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(5) through (6) No change.

Specific Authority 494.0011(2), 494.0032(2),(3), 494.0036(2) FS. Law Implemented 494.0011(2), 494.0032, 494.0036 FS. History--New 11-2-86, Amended 2-8-90, 10-1-91, 12-12-99, 11-1-00, _____.

3D-40.205 Mortgage Lender License, Mortgage Lender License Pursuant to Saving Clause, and Branch Office License Renewal and Reactivation.

(1) No change.

(2) A license that is not renewed as required in subsection (1) prior to September 1 of the renewal year shall revert to inactive status. An inactive license may be reactivated within six (6) months after becoming inactive upon payment of the statutory renewal and reactivation fees required by Section 494.0064, F.S., and submission of a completed reactivation form. If August 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(3) No change.

(4) A mortgage lender branch office license that is not renewed as required in subsection (3) prior to September 1 of the renewal year shall revert to inactive status. An inactive license may be reactivated within six (6) months after becoming inactive upon payment of the statutory renewal and reactivation fees required by Section 494.0064, F.S., and submission of a completed license reactivation form. If August 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(5) through (6) No change.

Specific Authority 494.0011(2), 494.0064(2) FS. Law Implemented 494.0011(2), 494.0064 FS. History--New 10-1-91, Amended 9-3-95, 8-5-96, 12-12-99, 11-1-00,_____.

3D-40.225 Correspondent Mortgage Lender License and Branch Office License Renewal and Reactivation.

(1) No change.

(2) A correspondent mortgage lender license that is not renewed as required in subsection (1) prior to September 1 of the renewal year shall revert to inactive status. An inactive license may be reactivated within six (6) months after becoming inactive upon payment of the statutory renewal and reactivation fees required by Section 494.0064, F.S., and submission of a completed reactivation form. If August 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(3) No change.

(4) A correspondent mortgage lender branch office that is not renewed as required in subsection (3) prior to September 1 of the renewal year shall revert to inactive status. An inactive license may be renewed within six (6) months after becoming inactive upon payment of the statutory renewal and reactivation fees required by Section 494.0064, F.S., and submission of a completed reactivation form. If August 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(5) through (6) No change.

Specific Authority 494.0011(2), 494.0064(2) FS. Law Implemented 494.0011(2), 494.0064 FS. History--New 10-1-91, Amended 9-5-95, 7-25-96, 12-12-99, 11-1-00,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Rick Morgan, Financial Control Analyst, Division of Securities and Finance

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Don B. Saxon, Director, Division of Securities and Finance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 23, 2000

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 17, 2000

DEPARTMENT OF BANKING AND FINANCE

Division of Securities and Finance

RULE TITLES:	RULE NOS.:
Consumer Collection Agency Registration	
Renewal Form and Procedures	3D-180.050
Commercial Collection Agency Registration	
Renewal Form and Procedures	3D-180.060

PURPOSE AND EFFECT: The purpose of the proposed amendments is to address registration expirations that occur on a Saturday, Sunday or legal holiday. The proposed rule allows renewals received on the following business day to be considered timely renewed.

SUMMARY: The proposed amendments provide that if December 31 of the renewal year falls on a Saturday, Sunday, or legal holiday, the renewals received on the next business day will be considered timely received.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: No statement of estimated regulatory cost has been prepared.

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

SPECIFIC AUTHORITY: 17.29 FS.

LAW IMPLEMENTED: 559.444, 559.545, 559.553, 559.555 FS.

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

TIME AND DATE: 10:00 a.m., January 8, 2001

PLACE: Room 550, Fletcher Building, 101 East Gaines Street, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Rick Morgan, Financial Control Analyst, Room 550, Fletcher Building, 101 East Gaines Street, Tallahassee, Florida 32399-0350, (850)410-9500

THE FULL TEXT OF THE PROPOSED RULES IS:

3D-180.050 Consumer Collection Agency Registration Renewal Form and Procedures.

(1) Each active consumer collection agency registration shall be renewed for the annual period beginning January 1 of each year, upon submission of the renewal fee of \$200 and the renewal form. Form DBF-CCA-104, Consumer Collection Agency Registration Renewal Form, effective 1-1-95, which is hereby incorporated by reference and available by mail from the Department of Banking and Finance, Division of Securities and Finance, 101 E. Gaines Street, Tallahassee, Florida 32399-0350. If December 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(2) No change.

Specific Authority 17.29 FS. Law Implemented 559.553(2), 559.555(3) FS. History--New 1-1-95, Amended.

3D-180.060 Commercial Collection Agency Registration Renewal Form and Procedures.

(1) Each active commercial collection Agency registration shall be renewed for the annual period beginning January 1 of each year, upon submission of the renewal fee of \$500 and the renewal form. Form DBF-COM-105, Commercial Collection Agency Registration Renewal Form, effective 1-1-95, which is hereby incorporated by reference and available by mail from the Department of Banking and Finance, Division of Securities and Finance, 101 E. Gaines Street, Tallahassee, Florida 32399-0350. If December 31 of the year is on a Saturday, Sunday, or legal holiday pursuant to Section 110.117, F.S., then the renewals received on the next business day will be considered timely received.

(2) No change.

Specific Authority 17.29 FS. Law Implemented 559.544(2), 559.545 FS. History--New 1-1-95, Amended.

NAME OF PERSON ORIGINATING PROPOSED RULE: Rick Morgan, Financial Control Analyst, Division of Securities and Finance

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Don B. Saxon, Director, Division of Securities and Finance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 23, 2000

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 17, 2000

DEPARTMENT OF BANKING AND FINANCE

Division of Securities and Finance

RULE TITLE:
Registration Renewals

RULE NO.:
3E-600.009

PURPOSE AND EFFECT: The purpose of the proposed rule change is to address registration expirations that occur on a Saturday, Sunday or legal holiday. The proposed rule allows renewals and reinstatements received on the following business day to be considered timely received.

SUMMARY: The registration of all dealers, investment advisers and associated persons expire on December 31. Registrations which are not timely renewed may be reinstated by submitting the requisite fees by January 31. If December 31 or January 31 falls on a Saturday, Sunday or legal holiday, the proposed amendments will allow renewals or reinstatements of registration received on the following business day to be considered timely received.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: No statement of estimated regulatory cost has been prepared.

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

SPECIFIC AUTHORITY: 517.03(1), 517.12(15) FS.

LAW IMPLEMENTED: 517.12(1),(11),(15) FS.

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

TIME AND DATE: 10:00 a.m., January 8, 2001

PLACE: Room 664, Fletcher Building, 101 East Gaines Street, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Rick White, Financial Administrator, Division of Securities and Finance, Room 664, Fletcher Building, 101 East Gaines Street, Tallahassee, Florida 32399-0350, (850)410-9805

THE FULL TEXT OF THE PROPOSED RULE IS:

3E-600.009 Registration Renewals.

(1) Every dealer and investment adviser, including issuer/dealers registered pursuant to Section 517.12, F.S. Florida Statutes, desiring to renew their registration shall annually verify with the Department prior to the date of expiration of registration, registration with the Department of the dealer or investment adviser, all associated persons of the dealer or investment adviser and all branch offices of the dealer or investment adviser in Florida, which the Department shows as being currently registered with such dealer or investment adviser subject to renewal, and which the dealer or investment adviser seeks to renew.

(2) In addition to verifying registration with the Department as provided in subsection (1), to renew its registration and that of its branch offices and associated persons, each dealer and investment adviser shall pay all

renewal fees as required by Section 517.12(11), ~~F.S. Florida Statutes~~. Renewal fees for non-NASD member firms, associated persons of non-NASD member firms and all branch offices shall be sent directly to the Department. The Department shall deem a fee received as payment at such time as it has been date stamped by the cashier's office of the Department of Banking and Finance. All renewal fees for NASD member firms and for associated persons of NASD member firms shall be submitted through the CRD. All renewal fees must be received by the Department or the CRD by the last business day prior to January 1 of the year following the year the registration expires.

(3) Failure to submit the requisite amount of fees to the Department or to the NASD as appropriate and as provided for in ~~subsection Section~~ (2) of this Rule by December 31 of the year of expiration of the registration shall result in such registration not being renewed. If December 31 falls on a Saturday, Sunday or legal holiday pursuant to Section 110.117, F.S., the renewals received on the next business day will be considered timely received. However, an expired registration may be reinstated in accordance with the provisions of Section 517.12(11), ~~F.S. Florida Statutes~~, provided that all requisite information and fees are filed with the Department on or before January 31 of the year following the year of expiration. Failure to submit the requisite amount of fees necessary to reinstate registration by January 31 of the year following the year of expiration shall result in such registration not being reinstated. If January 31 falls on a Saturday, Sunday or legal holiday pursuant to Section 110.117, F.S., the reinstatement received on the next business day will be considered timely received. In the event that the renewal or reinstatement is withdrawn or not granted, any fees filed to renew or reinstate registration shall become the revenue of the state pursuant to Section 517.12(10), Florida Statutes, and shall not be returnable.

Specific Authority 517.03(1), 517.12(15) FS. Law Implemented 517.12(10),(11),(15) FS. History--New 12-5-79, Amended 9-20-82, 8-29-83, Formerly 3E-600.09, Amended 1-7-88, 6-16-92, 11-14-93, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Rick White, Financial Administrator, Division of Securities and Finance

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Don B. Saxon, Director, Division of Securities and Finance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 31, 2000

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 17, 2000

DEPARTMENT OF INSURANCE

RULE TITLE: Annual Audited Financial Reports
RULE NO.: 4-137.002

PURPOSE AND EFFECT: Proposed amended rule 4-137.002(7)(c) specifies criteria for relief from the 7-year limit for an independent CPA to render audited financial reports of an insurer. Proposed amended rule 4-137.002(8) reduces the per-day fine for late applications for approval of combined financial reports. Proposed deleted rule 4-137.002(16) eliminates an unnecessary severability provision.

SUMMARY: The proposed amendments address qualifications of independent Certified Public Accountants, consolidated or combined audits, and a severability provision.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No SERC has been prepared.

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

SPECIFIC AUTHORITY: 624.308(1), 624.424(8)(e) FS.

LAW IMPLEMENTED: 624.324, 624.424(8) FS.

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

TIME AND DATE: 9:30 a.m., January 9, 2001

PLACE: Room 143, Larson Building, 200 East Gaines Street, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Wayne Johnson, Bureau Chief, Property and Casualty Insurer Solvency, Division of Insurer Services, Department of Insurance, 200 East Gaines Street, Tallahassee, Florida 32399-0329, (850)413-5232

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this program, please advise the Department at least 5 calendar days before the program by contacting Yvonne White at (850)413-4214.

THE FULL TEXT OF THE PROPOSED RULE IS:

- 4-137.002 Annual Audited Financial Reports.
 - (1) through (6) No change.
 - (7) Qualifications of Independent Certified Public Accountant.
 - (a) through (b) No change.
 - (c) A partner or other person responsible for rendering a report may not act in that capacity for more than seven (7) consecutive years. Following any period of service that person shall be disqualified from acting in that or a similar capacity for the same company or its insurance subsidiaries or affiliates for a period of two (2) years. An insurer may make application to the Department for relief from the above rotation requirement based on an unusual hardship to the insurer and a determination by the Department that the accountant is

~~exercising independent judgement that is not unduly influenced by the insurer, considering the following factors: pursuant to Section 624.424, Florida Statutes:~~

~~1. Number of partners, expertise of the partners, or the number of insurance clients in the currently registered firm;~~

~~2. Premium volume of the insurer; and~~

~~3. Number of jurisdictions in which the insurer transacts business.~~

~~(d) through (e) No change.~~

~~(8) Consolidated or Combined Audits.~~

~~(a) No change.~~

~~(b)1. The application for approval to consolidate is required each year, and must be filed with the Department prior to the end of the calendar year for which the approval is being granted, except that applications for approval will be accepted after the end of such calendar year subject to the imposition of an administrative fine on each insurer involved in such application as provided for in section 624.4211(2), Florida Statutes provided such application is received by the Department prior to March 1 immediately subsequent to the end of the calendar year for which such approval is being requested.~~

~~2. The amount of the fine shall be \$50 \$500 per day for each day beyond the end of the calendar year, not to exceed an aggregate amount of \$10,000 for the group of insurers requesting permission to file on a consolidated basis.~~

~~(c)1. A partner or other person responsible for rendering a report may not act in that capacity for more than seven (7) consecutive years. Following any period of service that person shall be disqualified from acting in that or a similar capacity for the same company or its insurance subsidiaries or affiliates for a period of two (2) years.~~

~~2. An insurer may make application to the Department for relief from the above rotation requirement based on an unusual hardship to the insurer and on the basis of a determination by the Department that the accountant is exercising independent judgement that is not unduly influenced by the insurer, considering the following factors: pursuant to Section 624.424, Florida Statutes:~~

~~a. Number of partners, expertise of the partners, or the number of insurance clients in the currently registered firm;~~

~~b. Premium volume of the insurer; and~~

~~c. Number of jurisdictions in which the insurer transacts business.~~

~~(9) through (15) No change.~~

~~(16) Severability Provision. If a subsection or portion of a subsection of this rule or the applicability thereof to any person or circumstance is held invalid by a court, the remainder of the rule or the applicability of the provision to other persons or circumstances shall not be affected thereby.~~

Specific Authority 624.308(1), 624.424(8)(e) FS. Law Implemented 624.324, 624.424(8) FS. History—New 3-31-92, Amended 3-14-94, 8-17-98,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Wayne Johnson, Bureau Chief, Property and Casualty Insurer Solvency, Division of Insurer Services, Department of Insurance

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Belinda Miller, Director, Division of Insurer Services, Department of Insurance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 24, 2000

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 10, 2000

DEPARTMENT OF TRANSPORTATION

RULE CHAPTER TITLE: Incorporation by Reference

RULE CHAPTER NO.: 14-15

RULE TITLE: Policy and Guidelines for Vehicular Connections

RULE NO.:

to Roads on the State Highway System

(Driveway Regulation Manual)

14-15.013

PURPOSE AND EFFECT: The Policy and Guidelines for Vehicular Connections to Roads on the State Highway System (Driveway Regulation Manual) was incorporated by reference in 1985. Later, with the adoption of Rule Chapters 14-96 and 14-97, most of the old manual was covered in those rule chapters. In 1990, the incorporation by reference statement in the rule was made more restrictive to only include certain specified sections of the manual. The rule is being repealed because the obsolete manual no longer is used.

SUMMARY: The Policy and Guidelines for Vehicular Connections to Roads on the State Highway System (Driveway Regulation Manual), which was incorporated by reference under this rule is obsolete so the rule is being repealed.

SPECIFIC AUTHORITY: 120.53(2)(a), 334.044(2), 335.18 FS.

LAW IMPLEMENTED: 120.53(2)(a), 334.044(14), 335.18 FS.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: None.

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

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: James C. Myers, Administrative and Management Support Level IV, Florida Department of Transportation, Office of the General Counsel, 605 Suwannee Street, Mail Station 58, Tallahassee, Florida 32399-0458

THE FULL TEXT OF THE PROPOSED RULE IS:

14-15.013 Policy and Guidelines for Vehicular Connections to Roads on the State Highway System (Driveway Regulation Manual).

Specific Authority 120.53(2)(a), 334.044(2), 335.18 FS. Law Implemented 120.53(2)(a), 334.044(14), 335.18 FS. History--New 8-15-85, Formerly 14-15.13, Amended 4-18-90, Repealed.

NAME OF PERSON ORIGINATING PROPOSED RULE: Gary Sokolow

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Thomas F. Barry, Jr., P.E., Secretary

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 1, 2000

DEPARTMENT OF CITRUS

RULE CHAPTER TITLE: Containers, Packs, Stamping and Labeling of Fresh Fruit

RULE CHAPTER NO.: 20-39

RULE TITLE: Approved Boxes

RULE NO.: 20-39.003

PURPOSE AND EFFECT: Would provide for two new containers to be added to the list of containers approved for use in shipping fresh Florida Citrus.

SUMMARY: Approved containers for use in shipping fresh Florida Citrus.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: No Statement of Regulatory Cost has been prepared.

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

SPECIFIC AUTHORITY: 601.11 FS.

LAW IMPLEMENTED: 601.11 FS.

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

TIME AND DATE: 10:30 a.m., January 17, 2001

PLACE: Department of Citrus Building, 1115 East Memorial Boulevard, Lakeland, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Alice P. Wiggins, Administrative Assistant, Legal Department, Florida Department of Citrus, P. O. Box 148, Lakeland, Florida 33802-0148

THE FULL TEXT OF THE PROPOSED RULE IS:

20-39.003 Approved Boxes.

(1) Unless otherwise noted, all approved boxes are 4/5 bushel capacity.

(2) The name of the manufacturer, and the official container number as designated in subsection (3) below, shall be printed on the bottom outside flap of each approved box body in plainly legible characters.

(3) The following containers are hereby designated as approved boxes and, unless otherwise noted, may be used for shipment of all varieties of citrus fruit:

Approved Container Number	Construction Styles	Inside Body Dimension in inches (LxWxD)	Minimum Weights (actual weight may be heavier)***	Board Minimum Board Weights (actual weight may be heavier)***
			Body	Cover
DOC-01-P	Singlewall	17 x 10-5/8 x 9-5/8**	42-33-69	42-33-42
DOC-02-V	Singlewall	17 x 11-1/2 x 9-3/4	42-33-69	42-33-42
		Oversized		
DOC-03-V	Singlewall	17 x 12 x 9-3/4	42-33-69	42-33-42
		Oversized		
DOC-04-PT	Tray Style	17 x 10-5/8 x 9-5/8**	42-33-42	42-33-42
DOC-05-PB	Bliss Style	17 x 10-5/8 x 9-5/8**	42-33-42	33-33-33
DOC-06-VT	Tray Style	17 x 11-1/2 x 9-3/4	42-33-42	42-33-42
		Oversized		
DOC-07-VT	Tray Style	17 x 12 x 9-3/4	42-33-42	42-33-42
		Oversized		
DOC-08-VB	Bliss Style	17 x 11-1/2 x 9-3/4	42-33-42	33-33-33
		Oversized		
DOC-09-VB	Bliss Style	17 x 12 x 9-3/4	42-33-42	33-33-33
		Oversized		
DOC-10-P	Doublewall	17 x 10-5/8 x 9-5/8	42-33-42-33-42	42-26-42
		Partial telescope self-locking lid Tangerines & citrus hybrids only. **		
DOC-11-XP	Singlewall	17 x 10-5/8 x 10-1/8**	90-33-90	42-33-42
DOC-12-XPT	Tray Style	17 x 10-5/8 x 10-1/8**	69-33-69	42-33-42
DOC-13-XPS	Super X Style	17 x 10-5/8 x 10-1/8**	42-40-69	42-33-42
DOC-14-P ††	Singlewall	15-7/8 x 10-5/8 x 6	42-33-42	42-33-42
		Full Telescope **		
DOC-15-PT ††	Tray Style	17-5/8 x 10-5/8 x 6	42-33-42	42-33-42
		Full Telescope **		
DOC-16-WP	Wood Slat	16-1/8 x 10-5/8 x 10-5/8	Wood Slat	Wirebound
		End panels may be of material other than wood.**		
DOC-17-WP	Wood Slat	19-7/8 x 7-1/2 x 11-1/2	Wood Slat	Wirebound
		End panels may be of material other than wood. Tangerines and citrus hybrids only.**		
DOC-18-P	Singlewall	17 x 10-5/8 x 9-5/8**	42-40-42	42-33-42
	Singlewall	17 x 10-5/8 x 9-5/8**	45-33-45	42-33-42
DOC-19-P				
DOC-20-XP††	Singlewall	17 x 10-5/8 x 10-1/8**	69-40-69	42-33-42

Approved Container Number	Construction Styles	Inside Body Dimension in inches (LxWxD)	Minimum Board Weights (actual weight may be heavier)***	
			Body	Cover
DOC-21-PT	Tray Style	17 x 10-9/16 x 9-5/8 4" partial telescope tray cover. Tangerines and citrus hybrids only.**	42-40-69	42-33-42
DOC-22-P ‡‡	Singlewall	13-1/4 x 10-5/8 x 7 Full telescope**	42-33-42	42-33-42
DOC-23-VT	Tray Style	17 x 12 x 9-5/8 End slotted with short end flaps. Oversized	69-33-42	42-33-42
DOC-24-P	Singlewall	17 x 10-5/8 x 9-5/8 4" partial telescoping tray cover. Tangerines and citrus hybrids only.**	69-40-90	42-33-42
DOC-25-PT ‡‡	Tray Style	16-1/8 x 10-5/8 x 6 Full Telescope**	42-33-42	42-33-42
DOC-26-P	Singlewall	18-1/4 x 12-1/2 x 11-3/4 Having three plastic trays per carton*	90-40-90	42-33-42
DOC-27-WV ‡‡	Collapsible wooden bin	46 x 38 x 21 Holds appx 20 4/5 bu. equiv. units	Wooden bin	None
DOC-28-P ‡‡	Singlewall	17 x 10-5/8 x 6** Full Telescope	42-33-42	42-33-42
DOC-29-P	Singlewall	16-3/4 x 11-1/2 x 11-3/8 Having fiberboard honeycomb cells**	42-40-69	42-33-42
DOC-30-P ‡‡	Singlewall	17 x 10 x 6-15/16 Corrugated, full telescope**	90-40-90	42-33-42
DOC-31-P	Singlewall	16-11/16 x 11-8/16 x 11-14/16 Corrugated with honeycomb dividers**	69-40-42	42-33-42
DOC-32-OV ‡‡	Triplewall-Bulk bin	46-1/2 x 38 x 36 Octagonal watermelon bin with self-locking lid. Holds appx. 28 4/5 bu. equiv.	69-33-69-33-69-3 3-90	69-26-69
DOC-33-P	Singlewall	20-45/16 x 11-13/16 x 7 Telescoping with two trays per carton **	42-33-69	42-33-42
DOC-34-OV ‡‡	Triplewall-Bulk bin	46 x 37-1/2 x 36 Octagonal with interlocking flaps. Holds appx. 28 4/5 bu. equiv.	42-40-90-42-40-9 0-40-90	42-26-69

Approved Container Number	Construction Styles	Inside Body Dimension in inches (LxWxD)	Minimum Board Weights (actual weight may be heavier)***	
			Body	Cover
DOC-35-OV ‡‡	Triplewall-Bulk bin	46 x 38 x 26-1/2 Tuff octagonal tube, holding appx. 24 4/5 bu. equiv.	90-33-42-33-42-3 3-90	69-26-69
DOC-36-P	Doublewall	23-5/8 x 15-5/8 x 7 Die cut platform tray, open top	42-36-33-26-42	
DOC-37-RV ‡‡	Triplewall-Bulk bin	46-1/2 x 38-1/2 x 26-1/2 Corrugated rectagon with diagonal corners and interlocking bottom (holds appx. 20 to 24 4/5 bu. equiv.)	64-33-35-64-33-9 6	35-26-35
DOC-38-P	Singlewall	16-3/4 x 11-1/2 x 10-3/8 Telescoping, half-slotted, optional molded fiber spring cushion trays**	99-33-90	42-33-69
DOC-39-P	Doublewall	17 x 10 _ x 9 _ Corrugated, half-slotted	42-33-33-33-42	42-33-42
DOC-40-P	Doublewall	18 15/16 x 14 3/16 x 11 13/16 One-piece, die cut	42-33-42-33-42	n/a
DOC-41-P	Plastic	22 1/2 x 14 9/16 x 7 _ One-piece, reusable/recyclable high-density polyethylene	n/a	n/a
DOC-42-P‡‡	Singlewall	17 1/2 x 11 _ x 8 3/4 Holding _ of a standard 4/5 bu. container, two-layer, full telescoping	90-40-90	42-33-42
DOC-43-OV‡‡	Triplewall 1/2 bulk bin	38 1/4 x 23 3/4 x 25 1/4 Space-saver, octagon 1/2 bin holding appx. 10 1/2 4/5 bu. equiv. loose or 7-8 4/5 bu. equiv. bagged	69-26-38-26-38-2 6-65	38-26-38
DOC-44-PT	Doublewall	22 _ x 14 11/16 x 6 _ B/c flute tray body, C flute cover	42-40-41-40-56	42-33-42
DOC-45-P	Singlewall	17 _ x 10 _ x 10 _ 4/5 c-flute, two piece, partial telescoping cover	42-33-57	42-26-35
DOC-46-PT	Doublewall	23 _ x 15 _ x 7 4/5 40 x 60 Euro Wave Tray	42-40-42-40-42	n/a

** Container may be volume filled provided the sizes designated for each variety of fruit meet the requirements of Sections 20-39.007(1), 20-39.008(1) and 20-39.009(1).

‡‡ Container does not conform to 4/5 bushel requirement of section 20-39.003(1)

*** Minimum board weight requirements shall be waived when a compression strength test by an independent testing laboratory shows that the container made with a new

material is equal to, or better than, compression strength of the container with minimum approved board weight. It shall be the responsibility of the packinghouse to acquire and provide records of such compression strength testing upon request.

(4) Each container must be ventilated.

Specific Authority 601.11 FS. Law Implemented 601.11 FS. History—Formerly 105-1.03(1)(a), Revised 1-1-75, Amended 8-16-75, 8-11-77, 8-1-78, 8-21-79, 1-15-80, 10-20-80, 5-1-81, 9-1-82, 11-6-83, 10-21-84, 1-1-85, Formerly 20-39.03, Amended 9-11-86, 12-20-87, 10-14-90, 8-23-92, 10-18-92, 1-19-93, 5-23-93, 10-10-93, 1-9-94, 10-16-94, 8-29-95, 10-13-96, 10-26-97, 12-6-98,

~~Specific Authority 601.10(1),(8), 601.15(1),(2),(4),(10), 601.155(7), 601.28(4), 601.69, 601.701 FS. Law Implemented 601.10(8), 601.15(1), 601.155(7), 601.69 FS. History—New~~

NAME OF PERSON ORIGINATING PROPOSED RULE: Mia L. McKown, General Counsel
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Mia L. McKown, General Counsel
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 25, 2000
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 9, 2000

NAME OF PERSON ORIGINATING PROPOSED RULE: Mia L. McKown, General Counsel
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Mia L. McKown, General Counsel
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 25, 2000
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 9, 2000

DEPARTMENT OF CITRUS

DEPARTMENT OF CITRUS

RULE CHAPTER TITLE: Loading Manifest to be Furnished to the Inspector – Fresh Citrus Fruit
RULE CHAPTER NO.: 20-40
RULE TITLE: Mandatory Automated Reporting
RULE NO.: 20-40.005
PURPOSE AND EFFECT: Would provide for mandatory automated reporting of loading manifests by all fresh citrus fruit shippers by a date certain.

RULE CHAPTER TITLE: Ownership and Use of "Florida Sunshine Tree" Certification Mark
RULE CHAPTER NO.: 20-94
RULE TITLE: Withdrawal of License or Permission
RULE NO.: 20-94.005
PURPOSE AND EFFECT: Would provide for licensed "Florida Sunshine Tree" products to be considered eligible for Department of Citrus promotion programs until September 1, 2001.

SUMMARY: Automated reporting of loading manifests.
SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: No Statement of Regulatory Cost has been prepared.

SUMMARY: "Florida Sunshine Tree" licensed products eligibility for Department promotion programs.
SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: No Statement of Regulatory Cost has been prepared.

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

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

SPECIFIC AUTHORITY: 601.10(1),(8), 601.15(1),(2), (4),(10), 601.155(7), 601.28(4), 601.69, 601.701 FS.

SPECIFIC AUTHORITY: 601.10(1), 601.11, 601.15(2)(b),(10)(a) FS.

LAW IMPLEMENTED: 601.10(8), 601.15(1), 601.155(7), 601.69 FS.

LAW IMPLEMENTED: 601.101 FS.

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

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

TIME AND DATE: 10:30 a.m., January 17, 2001

TIME AND DATE: 10:30 a.m., January 17, 2001

PLACE: Department of Citrus Building, 1115 East Memorial Boulevard, Lakeland, Florida

PLACE: Department of Citrus Building, 1115 East Memorial Boulevard, Lakeland, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Alice P. Wiggins, Administrative Assistant, Legal Department, Florida Department of Citrus, P. O. Box 148, Lakeland, Florida 33802-0148

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Alice P. Wiggins, Administrative Assistant, Legal Department, Florida Department of Citrus, P. O. Box 148, Lakeland, Florida 33802-0148

THE FULL TEXT OF THE PROPOSED RULE IS:

THE FULL TEXT OF THE PROPOSED RULE IS:

20-40.005 Mandatory Automated Reporting.

As of February 1, 2001 and thereafter, each shipper shall provide to the Department of Agriculture and Consumer Services, Division of Fruit and Vegetables an automated loading manifest containing all of the information required by this chapter in a form and manner prescribed by the Division.

20-94.005 Withdrawal of License or Permission.
(1) through (3) No change.
(4) Effective September 1, 2000, all authorizations granted by the Department of Citrus to use the Florida Sunshine Tree mark shall be rescinded, provided however, all participating users of the mark as of that date may continue to use existing label stock until such stocks are exhausted. Until such time as

existing label stocks are exhausted, products bearing the "Florida Sunshine Tree" mark shall be considered eligible products for use in Department promotions provided brand owner has shown intent, by filing appropriate documentation, to replace the "Florida Sunshine Tree" mark with the "Florida Citrus Growers' Symbol" mark on product labels. Effective September 1, 2001, products bearing the "Florida Sunshine Tree" mark shall no longer be considered eligible products for use in Department promotions.

Specific Authority 601.10(1), 601.11, 601.15(2)(b),(10)(a) FS. Law Implemented 601.101 FS. History--Formerly 105-1.46(3)(5), Revised 1-1-75, Amended 5-22-83, Formerly 20-94.05, Amended 11-9-89, 12-6-98.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Mia L. McKown, General Counsel
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Mia L. McKown, General Counsel
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 25, 2000
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 9, 2000

DEPARTMENT OF CORRECTIONS

RULE TITLE: Law Libraries
RULE NO.: 33-501.301
PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to change the required minimum hours of operation for all law libraries with major and minor collections to 25 hours per week.
SUMMARY: The proposed rule changes the required minimum hours of operation for all law libraries with major and minor collections to 25 hours per week.
SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: None.

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

SPECIFIC AUTHORITY: 20.315, 944.09, 944.11 FS.
LAW IMPLEMENTED: 944.09, 944.11 FS.
IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW.
THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Perri King Dale, Office of the General Counsel, Department of Corrections, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500

THE FULL TEXT OF THE PROPOSED RULE IS:

- 33-501.301 Law Libraries.
- (1) No change.
- (2) Law Library Access – General.

(a) Hours of Operation. Major and minor collection law libraries ~~that do not provide services to inmates in general population shall be open for inmate use a minimum of 25 32 hours per week. Major and minor collection law libraries that are open to use by inmates in general population shall be open a minimum of 32 hours per week, with a minimum of 6 hours per week after 5:00 p.m. or on weekends. Only hours in which inmates have direct access to the law library collection and inmate law clerks shall count toward the 32 hour minimum. Institutions shall not reduce the law library's operating hours below the 32 hour minimum because of staff shortages. The law library's operating schedule shall be established by the warden and shall be designed to permit each inmate with the maximum access to legal materials consistent with:~~

1. The inmate's security classification and housing assignment;
2. Staff and space limitations;
3. Scheduled work and other assignments; and
4. Any other limitation based on the interests of security and order of the institution.

(b) through (17) No change.

Specific Authority 20.315, 944.09, 944.11 FS. Law Implemented 944.09, 944.11 FS. History--New 4-6-93, Amended 7-3-94, 11-2-94, 4-28-96, 9-30-96, 12-7-97, Formerly 33-3.0055, Amended _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Richard Nimer
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Michael W. Moore
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: November 16, 2000
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: October 27, 2000

**AGENCY FOR HEALTH CARE ADMINISTRATION
Division of Managed Care and Health Quality**

RULE TITLE: Authorization Procedures
RULE NO.: 59A-23.003
PURPOSE AND EFFECT: The Agency for Health Care Administration is proposing to amend rule 59A-23.003, Florida Administrative Code, to implement subsection (25) of section 440.134, Florida Statutes. The effect of the proposed changes will establish and clarify the procedures for authorization and examination of workers' compensation managed care arrangements.
SUMMARY: Section 440.134(25), Florida Statutes, mandates that the Agency for Health Care Administration adopt a rule specifying procedures for authorization and examination of Workers' Compensation Managed Care Arrangements. The rule amendment specifies: authorization procedures and requirements; implementation of the policies and procedures; approval criteria for delegated entities, provider networks, and credentialing and recredentialing providers; time frames for

conducting network reviews; insurers' and medical care coordinators' responsibilities; and utilization of advanced registered nurse practitioners and physician assistants.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: No statement of estimated regulatory cost has been prepared.

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

SPECIFIC AUTHORITY 440.134(25) FS.

LAW IMPLEMENTED 440.134 FS.

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

TIME AND DATE: 10:00 a.m. (EST), January 11, 2001

PLACE: Agency for Health Care Administration, 2727 Mahan Drive Building 3, Room A, Tallahassee, Florida 32308

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Robert Pannell, Unit Administrator, Bureau of Managed Health Care, Agency for Health Care Administration, 2727 Mahan Drive, Building 1, Mail Stop 26, Tallahassee, Florida 32308, (850)922-6481

THE FULL TEXT OF THE PROPOSED RULE IS:

59A-23.003 Authorization Procedures.

(1) General Provisions. All insurers offering a managed care arrangement for the provision of health services for the treatment of persons filing workers' compensation claims shall obtain an authorization from the agency in accordance with the following procedures:

(a) Applications for an initial authorization, amendment of the authorized plan of operation, or renewal shall be submitted with the following:

1. A completed copy of an AHCA Form 3160-0004, November 2000, March 1997, incorporated by reference herein;

2. Required attachments as specified in AHCA Form 3160-0004, November 2000; and

3. Written agreements linking the entities within the managed care arrangement and specifying the duties of each entity.

Application forms are available from and shall be submitted to the Agency for Health Care Administration, Division of Managed Care and Health Quality Assurance, Bureau of Managed Health Care, 2727 Mahan Drive, Mail Stop 26 Suite 303, Tallahassee, Florida 32308. This form is available from the agency by contacting the Agency for Health Care Administration, Division of Health Quality Assurance, Bureau of Managed Health Care, 2727 Mahan Drive, Tallahassee, Florida 32308.

(b) An initial application for authorization shall be submitted to the agency at least 90 days prior to the intended date of implementation of services. An amendment application shall be submitted to the agency 60 days prior to the effective date of the proposed change in the plan of operation. Upon receipt of the application the agency shall review the content to determine compliance with the requirements of paragraphs 440.134(5) through (15), F.S.

(c) The agency applicant shall notify applicants for initial or renewal authorization in writing via certified mail of any deficiencies in the application be notified within 30 days of the receipt of the application as to the determination of the agency with regard to authorization of the applicant as a workers' compensation managed care arrangement. If it is determined that the application does not meet the requirements for authorization, the agency shall notify the applicant in writing via certified mail within 30 days of the receipt of the application of those specific items found to be deficient. The applicant shall have provide information necessary to complete the application within 30 days of from receipt of the written notice to provide additional information amending the application. Failure to timely submit the necessary information shall result in a denial of the application unless the agency determines, based on the application, that the applicant needs an extension of time due to circumstances beyond its control and requests the extension within 30 days of its receipt of the written notice of deficiencies to meet the quality of care requirements of 440.134(2)(a). No Such extensions shall not exceed 90 days or the expiration date of the workers' compensation managed care arrangement.

(d) The agency shall provide notice to the applicant of its right to administrative review under section 120.569 and 120.57, F.S., with its written notice of intent to deny an application. Insurers who submit an application for authorization prior to January 1, 1997 and who are currently providing workers' compensation services through a managed care arrangement may continue to provide such services until such time as the agency makes a final determination regarding the application.

(e) Applications to amend an approved plan of operation by replacing the delegated managed care organization or provider network shall address the continuity of care and coordination of medical services for injured employees during the transition. The applicant shall submit information that identifies the activities to be conducted, persons involved, and dates for completion of the following tasks: Denial of an application for a managed care arrangement shall be appealed within 21 days of receipt of a written notice from the agency by the applicant or designated representative. If an administrative hearing is not requested within 21 days of the receipt of a written notice from the agency, the applicant's right to request such a hearing will be waived. A request for an administrative hearing shall be filed with the agency clerk in accordance with

the requirements of Section 120.57, F.S., at the following address: Sam Power, Agency Clerk, Agency for Health Care Administration, Fort Knox Executive Center, 2727 Mahan Drive, Building 3, Room 3431, Tallahassee, Florida 32308.

1. The identification and authorization of out of network services for injured employees whose current primary treating physician is not in the new provider network and who prefer to continue with their current provider;

2. The transfer of injured employees' current medical care management information to the newly contracted entity; and

3. The notification of employers and employees of the requirements of the new network arrangements and the contact persons via the educational materials required under section 440.134(14)(a) through (d), F.S.

~~(f) Upon authorization of a managed care arrangement the agency shall forward copies of the application, the authorization letter, and the summary of operations to the Department of Insurance.~~

~~(f)(g) Examination.~~ The agency shall conduct an on-site survey of the each managed care arrangement, within the first year of operation and no less than every two years thereafter, to determine compliance with the requirements of Section 440.134, F.S. The agency shall verify through subsequent survey that any deficiency identified during a previous survey is corrected. The agency may verify the correction without on-site resurvey if written documentation has been received from the insurer or delegated entity and is accepted by the agency. The agency shall also investigate on-site any alleged pattern of non-compliance with the requirements of section 440.134, F.S.

(2) Fees. All initial and renewal applications for authorization of a workers' compensation managed care arrangement shall be accompanied by a non-refundable fee of \$1,000 made payable to the agency. Applications to amend an existing for expansion of an existing service area for a previously authorized workers' compensation managed care arrangement do not require submission of a fee.

(3) Authorization for as a workers' compensation managed care arrangement shall not be sold, assigned, or otherwise transferred either voluntarily or involuntarily and is valid only for the legal entity to which it was originally issued. transferred or assigned to any entity other than that which was originally issued the authorization. A new application for authorization is required when 50 percent or more of the ownership or controlling interest of a certified entity has been transferred or assigned.

(4) Validity. Each authorization shall be valid for a period of two years only for:

(a) The the entity to which it is issued as specified on the authorization approval letter; and

(b) The service area approved shall not be subject to sale, assignment, or other transfer, voluntary or involuntary, nor shall an authorization be valid for any service area other than that for which it has been authorized by the agency.

(5) Service areas. Each application shall indicate the geographic service area or areas in which the insurer or delegated entity will provide managed care services. The insurer shall offer a managed care arrangement only to those employers whose place of business or business operations are located in a service area approved authorized by the agency to provide services under a workers' compensation managed care arrangement. A service area shall be approved authorized if there is a sufficient number and type of providers adequate to meet the needs of the geographic area in addition to other requirements specified under Rules 59A-23.003, .004, .005, and .006.

~~(6) Expansions of service area. An insurer seeking to expand the service area of an existing, certified workers' compensation managed care arrangement shall submit an amendment to its original application on AHCA Form 3160-0004, March 1997, with information to justify the proposed expansion.~~

~~(6)(7) Travel Times.~~ Each application shall provide information which indicates the its ability of the insurer or delegated entity to provide geographic access to health services for injured employees workers. Average travel time for injured employees from the employee's usual employment site from the managed care arrangement geographic services area boundary to the nearest primary care delivery site and to the nearest general acute care hospital in the provider network under arrangement with the insurer to provide health care services shall be no longer than 30 minutes under normal circumstances. Average travel time from the employee's usual employment site insurer's geographic service area boundary to the nearest provider of specialty physician services, ancillary services, specialty inpatient hospital services and all other health services shall be no longer than 60 minutes under normal circumstances.

~~(7)(8) Provider Network.~~

(a) Medical services shall be available for injured employees in the geographic area in which they are employed through directly or indirectly contracted network(s) of health care providers. The hours of operation and availability of after-hour care must reflect usual practices in the community and the insurer must demonstrate that:

1. All medically necessary services are available and accessible;

2. Medically necessary referrals are provided within the network or, if unavailable, outside the network;

3. There are written agreements describing specific delegated duties for provision of medical services. Delegation of the provision of medical services by the insurer must be specifically described in the written agreement linking the insurer with the delegated entity;

4. Written agreements for arrangements in which the insurer is indirectly linked with a provider network shall contain language requiring the insurer's approval in advance of a change in the provider network; and

5. There are written agreements with providers prohibiting such providers from billing or otherwise seeking reimbursement from or recourse against any injured employee except as specified under section 440.13, F.S.

(b) The insurer or delegated entity, shall establish and implement a policy and procedure regarding access to services which reflects usual and customary practices in the community and addresses access times for emergency, initial, and continuing care including referrals to specialty services.

(c) The agency shall examine provider networks at least annually. The insurer or delegated entity, shall file with the agency an updated list of providers by county, by specialty, semiannually. The list shall be submitted within six months of the initial network approval date and every six months thereafter in a format approved or prescribed by the agency.

(d) The insurer or delegated entity shall develop and implement a policy and procedure for credentialing and recredentialing network providers as needed but, at a minimum every two years. The credentialing criteria shall be specified in the policy and shall include the core credentialing data specified under paragraph 455.557(2)(d), F.S., and verification of education of providers as required by 440.134(8), F.S.

(e) The recredentialing process shall monitor and incorporate quality assurance findings and information on individual providers including sanctions, complaints and grievances, medical record audits, provider profiling, and employee satisfaction.

(f) If the insurer delegates all or part of the credentialing process to other organizations, the insurer shall specify the activities of the delegated entity and the oversight and reporting requirements in the written agreement. The insurer shall perform oversight of the delegated credentialing activities annually.

(g) The insurer or delegated entity, shall designate one or more physicians as a medical care coordinator to manage medical care for injured workers. A medical care coordinator shall be assigned for each injured employee. The medical care coordinator shall be licensed under chapter 458 or 459, F.S., and be board certified by the American Board of Medical Specialities, or the American Osteopathic Association, or have two years experience as a participating provider in a workers' compensation managed care arrangement network. The medical care coordinator shall have experience or training in workers' compensation and be responsible for the following:

1. Management of the medical treatment plan;

2. Participation in the quality improvement process and evaluation of outcomes of care;

3. Review of grievances; and

4. Authorization of referrals to specialty providers for second opinions, evaluation of treatment, including changes to another specialty provider pursuant to paragraph 440.134, (10)(c), F.S.

(h) Nothing in this rule prohibits the use by a medical or osteopathic physician of advanced registered nurse practitioners licensed under chapter 464.012, F.S. or physician's assistants licensed under chapter 458 or 459, F.S., in accordance with and within the scope of their professional licenses in Florida Statute. An injured employee shall be evaluated or treated by the physician supervising the advanced registered nurse practitioner or physician assistant if specifically requested by the injured employee.

(i) The insurer or delegated entity, may direct injured employees to a single primary care provider or a selected group of primary care providers within the provider network for assessment and initial treatment. However, the employee shall have the right to select a primary care provider and thereafter, to request one change of primary care provider and of each authorized treating specialty provider during the course of treatment for each injury. The injured employee shall select a primary care provider from a current list of all primary care providers in the approved service area within 30 minutes average travel time of the employee's employment site.

(j) ~~(a)~~ Initial and network change Each applications shall contain provide information on the numbers, types, and locations of health care providers which are included in the managed care network. The types of providers to be included shall comply with those listed on AHCA Form 3160-0005, November 2000, ~~March 1997~~, WCMCA Service Area Network Checklist, incorporated herein by reference. This form is available from the agency by contacting the Agency for Health Care Administration, Division of Managed Care and Health Quality, ~~Assurance~~, Bureau of Managed Health Care, 2727 Mahan Drive, Mail Stop 26, Tallahassee, Florida 32308.

(8) Delegation. The insurer shall conduct oversight of the delegated functions of the workers' compensation managed care arrangement. The insurer is responsible for the performance of all functions associated with the delivery of medical services to injured employees under section 440.134(1)(g), F.S., regardless of whether the function has been delegated, by written agreement, to other entities. The insurer shall specify, in the written agreement, the oversight and reporting requirements for monitoring the performance of delegated functions. Reports of subcontractors shall be evaluated no less than quarterly, and the findings incorporated into the insurer's quality assurance program.

Specific Authority 440.134(25)(2)(a) FS. Law Implemented 120.57, 440.134(1)(g),(2)(a),(3),(4),(5),(6),(10),(12),(13),(14) FS. History--New 9-12-94, Amended 4-30-98,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Robert Pannell
NAME OF SUPERVISOR OR PERSON WHO APPROVED
THE PROPOSED RULE: Secretary Ruben J. King-Shaw, Jr.
DATE PROPOSED RULE APPROVED BY AGENCY
HEAD: December 4, 2000
DATE NOTICE OF PROPOSED RULE DEVELOPMENT
PUBLISHED IN FAW: The Notice of Rule Development for
59A-23.003, Authorization Procedures was published in Vol.
25, No. 32, Florida Administrative Weekly, August 13, 1999,
edition

**DEPARTMENT OF BUSINESS AND PROFESSIONAL
REGULATION**

Board of Auctioneers

RULE TITLE: Selection and Training of Investigators
RULE NO.: 61G2-1.0175
PURPOSE AND EFFECT: The rule is being repealed.
SUMMARY: The rule is being repealed, which is obsolete.
SUMMARY OF STATEMENT OF ESTIMATED
REGULATORY COST: No Statement of Estimated
Regulatory Cost was prepared.
Any person who wishes to provide information regarding the
statement of estimated costs, or to provide a proposal for a
lower cost regulatory alternative must do so in writing within
21 days of this notice.
SPECIFIC AUTHORITY: 468.384(2) FS.
LAW IMPLEMENTED: 468.384(3) FS.
IF REQUESTED WITHIN 21 DAYS OF THE DATE OF
THIS NOTICE, A HEARING WILL BE SCHEDULED AND
ANNOUNCED IN THE FAW:
THE PERSON TO BE CONTACTED REGARDING THE
PROPOSED RULE IS: Julie Baker, Executive Director, Board
of Auctioneers, Northwood Centre, 1940 N. Monroe Street,
Tallahassee, Florida 32399-0750

THE FULL TEXT OF THE PROPOSED RULE IS:

61G2-1.0175 Selection and Training of Investigators.
~~Investigators employed by the Department to assist the Board
in disciplinary matters shall meet the following requirements:~~

Specific Authority 468.384(2) FS. Law Implemented 468.384(3) FS. History-
New 3-30-89, Formerly 21BB-1.0175, Repealed.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Auctioneers
NAME OF SUPERVISOR OR PERSON WHO APPROVED
THE PROPOSED RULE: Board of Auctioneers
DATE PROPOSED RULE APPROVED BY AGENCY
HEAD: October 30, 2000

**DEPARTMENT OF BUSINESS AND PROFESSIONAL
REGULATION**

Board of Auctioneers

RULE TITLE: Definition of Absolute Auction
RULE NO.: 61G2-8.020
PURPOSE AND EFFECT: The rule is being repealed.
SUMMARY: The rule is being repealed, which is obsolete.
SUMMARY OF STATEMENT OF ESTIMATED
REGULATORY COST: No Statement of Estimated
Regulatory Cost was prepared.
Any person who wishes to provide information regarding the
statement of estimated costs, or to provide a proposal for a
lower cost regulatory alternative must do so in writing within
21 days of this notice.
SPECIFIC AUTHORITY: 468.384(2) FS.
LAW IMPLEMENTED: 468.381 FS.
IF REQUESTED WITHIN 21 DAYS OF THE DATE OF
THIS NOTICE, A HEARING WILL BE SCHEDULED AND
ANNOUNCED IN THE FAW:
THE PERSON TO BE CONTACTED REGARDING THE
PROPOSED RULE IS: Julie Baker, Executive Director, Board
of Auctioneers, Northwood Centre, 1940 N. Monroe Street,
Tallahassee, Florida 32399-0750

THE FULL TEXT OF THE PROPOSED RULE IS:

61G2-8.020 Definition of Absolute Auction.
~~Absolute auction means an auction which requires no
minimum opening bid which limits the sale other than to the
highest bidder.~~

Specific Authority 468.384(2) FS. Law Implemented 468.381, 468.383 FS.
History-New 11-29-92, Formerly 21BB-8.020, Repealed.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Auctioneers
NAME OF SUPERVISOR OR PERSON WHO APPROVED
THE PROPOSED RULE: Board of Auctioneers
DATE PROPOSED RULE APPROVED BY AGENCY
HEAD: October 30, 2000

DEPARTMENT OF HEALTH

Board of Acupuncture

RULE TITLE: Standards for Approval of Continuing
Education Credit
RULE NO.: 64B1-6.005
PURPOSE AND EFFECT: The proposed rule will require that
continuing education programs contribute to licensee's
knowledge and skills related to the safe and beneficial use of
laboratory test and imaging findings.
SUMMARY: The proposed changes to the current Rule will
set forth standards for the course content of and objectives for
continuing education courses related to laboratory test or
imaging findings.

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

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

SPECIFIC AUTHORITY: 457.104, 457.107(3), 456.033 FS.

LAW IMPLEMENTED: 457.107(3), 456.033 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT A TIME, DATE AND PLACE TO BE PUBLISHED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

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 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

64B1-6.005 Standards for Approval of Continuing Education Credit.

(1) A continuing education program must contribute to the advancement, extension or enhancement of the licensee's skills and knowledge related to the practice of acupuncture and oriental medicine as a primary health care provider. Programs should concern the history and theory of acupuncture, acupuncture diagnosis and treatment techniques, techniques of adjunctive therapies, acupuncturist-patient communication and professional ethics. All continuing education courses are subject to evaluation and approval by the Board which has final determination as to the number of hours of acceptable credit that will be awarded for each program.

(2) through (5) No change.

(6) Continuing education programs related to laboratory test or imaging findings shall be designed to provide course content on the clinical relevance of laboratory and diagnostic tests and procedures as well as biomedical physical examination findings and to advance, extend or enhance the licensee's skills and knowledge related to the safe and beneficial use of laboratory test and imaging findings.

Specific Authority 457.104, 457.107(3), 456.033 ~~455.604~~ FS. Law Implemented 457.107(3), 456.033 ~~455.604~~ FS. History--New 2-24-88, Amended 8-6-89, Formerly 21AA-6.005, 61F1-6.005, Amended 3-18-97, Formerly 59M-6.005, Amended 6-1-99.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Acupuncture

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Board of Acupuncture

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 1, 2000

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 29, 2000

DEPARTMENT OF HEALTH

Board of Acupuncture

RULE TITLE: Continuing Education Requirements

RULE NO.: 64B1-7.0015

PURPOSE AND EFFECT: The proposed changes to the current rule will add a requirement that course work related to the safe and beneficial use of laboratory test and imaging findings must be included in the continuing education taken by acupuncturist for purposes of renewal of their license.

SUMMARY: The proposed amendments to the current Rule will increase effective March 1, 2002 the required number of continuing education hours from 20 hours to 30 hours each licensure biennium; will decrease the required number of continuing education hours in HIV/AIDS from 3 hours to 2 hours each licensure biennium; will require licensees to complete at least 5 hours each licensure biennium of continuing education concerning the use of laboratory test findings; and will require licensees to complete at least 3 hours each licensure biennium of continuing education concerning the use of imaging findings. The proposed changes will also permit licensees to complete a course in end-of-life care and palliative health care in lieu of completing a course in HIV/AIDS so long as the licensee completed an approved HIV/AIDS course in the immediately preceding biennium.

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

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

SPECIFIC AUTHORITY: 457.104, 457.107, 457.108, 457.1085, 456.033 FS.

LAW IMPLEMENTED: 457.107, 457.108, 457.109, 457.1085, 456.033, 455.271 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE HELD AT A TIME, DATE AND PLACE TO BE PUBLISHED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

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 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

64B1-7.0015 Continuing Education Requirement.

(1) As a condition of the biennial renewal of a license, each licensee shall complete a minimum of ~~attend~~ 20 credit hours per biennium of continuing education that meets the requirements of Section 457. Effective March 1, 2002, as a condition of the biennial renewal of a license, each licensee shall complete a minimum of 30 credit hours per biennium of

continuing education that meets the requirements of Section 457. Each biennium, the licensee shall complete a Board-approved program awarding at least 2 3 hours of continuing education credit concerning HIV/AIDS, which shall comply with the requirements of Section 456.033(2) 455.604(1), Florida Statutes. Pursuant to Section 455.604(2), Florida Statutes, each licensee shall submit confirmation of having completed said course when submitting fees for each biennial renewal. In lieu of completing a course in HIV/AIDS as required above, the licensee may complete a course in end-of-life care and palliative health care, so long as the licensee completed an approved HIV/AIDS course in the immediately preceding biennium. Each biennium, the licensee shall complete a program awarding at least 5 hours of continuing education credit concerning the use of laboratory test findings. Each biennium, the licensee shall complete a program awarding at least 3 hours of continuing education credit concerning the use of imaging findings.

(2) No change.

(3) The Board and/or the Department will audit a number of licensees who are selected at random as is necessary to assure that the continuing education requirements are met. Each licensee shall retain such receipts, vouchers or certificates as may be necessary to document completion of the continuing education requirements for a period of 2 years following the biennium for which they are applied. Failure to document compliance with the continuing education requirements, or furnishing false or misleading information regarding compliance shall be grounds for disciplinary action under Rule 64B1-9.001.

Specific Authority 457.104, 457.107, 457.108, 457.1085, 456.033 455.2226 FS. Law Implemented 457.107, 457.108, 457.109, 457.1085, 456.033 455.2226, 455.271 FS. History--New 3-18-97, Formerly 59M-7.0015, Amended 4-25-00,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Acupuncture
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Board of Acupuncture
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: December 1, 2000
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 22, 2000

DEPARTMENT OF HEALTH

Board of Medicine

RULE TITLE: Citations
RULE NO.: 64B8-55.002
PURPOSE AND EFFECT: The Electrolysis Council proposed to the Board of Medicine that an amendment be promulgated to provide a fine for a first offense of unprofessional conduct where no patient harm occurred.
SUMMARY: This amendment serves to address specific requirements for a first offense of unprofessional conduct.

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

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

SPECIFIC AUTHORITY: 456.077(1),(2) FS.

LAW IMPLEMENTED: 456.072(3)(b), 456.077(1),(2), 478.51, 478.52 FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE NEXT AVAILABLE ISSUE OF THE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kaye Howerton, Executive Director, Electrolysis Council/MQA, 4052 Bald Cypress Way, Bin #C05, Tallahassee, Florida 32399

THE FULL TEXT OF THE PROPOSED RULE IS:

64B8-55.002 Citations.

(1) through (3) No change.

(4) The Board designates the following as citation violations:

(a) through (p) No change.

<u>(q) Unprofessional conduct, failure to conform to acceptable standards.</u>	<u>(q) First time violation where no actual patient harm occurred – \$250 fine.</u>
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(5) through (6) No change.

Specific Authority 456.077(1),(2) 455.617(1),(2) FS. Law Implemented 456.072(3)(b), 456.077(1),(2) 455.617(1),(2), 455.624(3)(b), 478.51, 478.52 FS. History--New 11-16-93, Formerly 61F6-80.002, Amended 1-2-95, Formerly 59R-55.002, Amended 11-13-97, 10-12-98,_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Electrolysis Council
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Board of Medicine
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 5, 2000
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: October 27, 2000

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

DEPARTMENT OF INSURANCE

RULE NO.: 4-154.530
RULE TITLE: Renewal of Group Health Insurance

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. 36, September 8, 2000, of the Florida Administrative Weekly. These changes are being made to address concerns expressed.

The rule has been changed to read as follows:

4-154.530 Renewal of Group Health Insurance.

An insurer or health maintenance organization that issues a group health insurance policy must renew or continue in force such coverage at the option of the policyholder. Employers are eligible to renew that exact coverage, subject to the participation requirement provisions of sections 627.6571(2) and 641.31074(2)(c), Florida Statutes.

Specific Authority 624.308(1), 627.6699(16) FS. Law implemented 624.307, 627.6571, 641.31074 FS. History—New _____.

DEPARTMENT OF COMMUNITY AFFAIRS

Division of Emergency Management

RULE CHAPTER NO.:	RULE CHAPTER TITLE:
9G-6	Review of Local Emergency Management Plans and Programs
RULE NOS.:	RULE TITLES:
9G-6.002	Definitions
9G-6.0023	County Comprehensive Emergency Management Plans
9G-6.0025	The County Radiological Emergency Plan for Nuclear Power Plants
9G-6.005	Schedule for Development and Review of County and Municipal Comprehensive Emergency Management Plus
9G-6.006	County Comprehensive Emergency Management Plans – Review by Division
9G-6.0095	Municipal Comprehensive Emergency Management Plans
9G-6.010	Municipal Comprehensive Emergency Management Plans – Review by County Emergency Management

NOTICE OF CHANGE

Notice is hereby given that changes have been made to the proposed rule which was published September 15, 2000, in Vol. 26, No. 37 and it now reads as follows:

9G-6.002 Definitions.

(1) through (6) No change.

(7) “County Radiological Emergency Plan for Nuclear Power Plants” means the plan to be prepared by the Division and county governments within 50 miles of a commercial nuclear power plant.

(8) “County Emergency Management Program” means the emergency management program authorized and mandated by Section 252., F.S. to be created by each legally constituted county in the state.

Specific Authority 252.35(2)(u) FS. Law Implemented 252.35(1),(2)(a),(b),(c),(d),(k),(v) FS. History—New 1-18-81, Amended 2-24-85, Formerly 9G-6.02, Amended 2-5-91, 5-11-95, _____.

9G-6.0023 County Comprehensive Emergency Management Plans.

(1) Each county emergency management agency established pursuant to the authority contained in Section 252.38(2), F.S., shall develop and submit to the Board of County Commissioners for adoption a County Comprehensive Emergency Management Plan in compliance with the requirements, format and standards contained in this rule chapter.

(2) County Comprehensive Emergency Management Plans will be coordinated and consistent with the provisions of the State Plan. The county emergency management plan will include an evacuation component, a shelter component (risk and host events), and a post-disaster and recovery component and will consist of provisions addressing aspects of preparedness, response, recovery and mitigation. The county plan will assign lead and support responsibilities for county agencies and personnel that coordinate with the emergency support functions outlined in the State Plan.

(3) The County Comprehensive Emergency Management Plan shall be specific and shall address responses and actions in the event of an emergency. It shall clearly identify those positions or agencies responsible for specific functions under given circumstances. Responsibilities must be assigned by position title or agency name, and specific duties for each position or agency must be listed. Checklists and other readily accessible and easy-to-use guidelines are encouraged. Where appropriate, the county plan shall contain maps, diagrams and other visual aids. Copies of the forms the local government will use shall be available for review.

(4) The County Comprehensive Emergency Management Plan shall be divided into a minimum of two components: the Basic Plan and the Capability ~~Assessment Demonstration~~. The Basic Plan shall be narrative in form and generally describe responsibilities within the emergency management framework. It shall include but not be limited to two annexes addressing the recovery and mitigation functions of the county emergency management program. The Basic Plan and the Recovery and Mitigation Annexes shall include organizational charts, maps and checklists. The Capability ~~Assessment Demonstration~~ shall demonstrate competencies and present information outlined in the County Comprehensive Emergency Management Plan, standard operating procedures and other supporting documents that are involved in the emergency management program, i.e., emergency response, recovery and mitigation activities.