PURPOSE AND EFFECT: The purpose of Rule Chapter 67-38, Florida Administrative Code (F.A.C.), is to establish the procedures by which the Florida Housing Finance Corporation shall administer the application process, determine loan or grant amounts to non-profit entities who engage in development of affordable housing for very low or low-income households.

SUBJECT AREA TO BE ADDRESSED: The Rule Development Workshop will be held to receive comments and suggestions from interested persons relative to the development of the 2002 Application and program requirements for the Predevelopment Loan Program, as specified in Rule Chapter 67-38, Florida Administrative Code ("F.A.C.").

SPECIFIC AUTHORITY: 420.528 FS.

LAW IMPLEMENTED: 420.507, 420.521-420.529 FS.

A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW:

TIME AND DATE: 10:00 a.m., July 2, 2002

PLACE: Florida Housing Finance Corporation, 227 North Bronough Street, 6th Floor, Seltzer Room, Tallahassee, FL 32301

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT, IF AVAILABLE, IS: Kerey Carpenter, Deputy Development Officer, Florida Housing Finance Corporation, 227 North Bronough Street, Suite 5000, Tallahassee, FL 32301-1329, (850)488-4197

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

Section II Proposed Rules

DEPARTMENT OF INSURANCE

RULE TITLE: RULE NO.: Annual and Quarterly Reporting Requirements 4-137.001 PURPOSE AND EFFECT: The purpose of the proposed rule development is to adopt current NAIC annual statement instructions and accounting practices manuals.

SUMMARY: As amended, the rule would require insurers to follow the 2002 editions of NAIC's annual statement instructions and accounting procedures manuals rather then the 2001 editions. It also provides a new option to insurers that write health insurance only to use the annual statement instructions for health insurance rather than the instruction manual for life, accident and health.

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: 624.307, 624.308(1) FS.

LAW IMPLEMENTED: 624.307(1), 624.424(1) FS.

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

TIME AND DATE: 2:00 p.m., Tuesday, July 9, 2002

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kerry Krantz, Actuary, Division of Insurer Services, Department of Insurance, 200 E. Gaines Street, 317B Larson Building, Tallahassee, FL 32399-0327, (850)413-4153

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, (850)413-4214.

THE FULL TEXT OF THE PROPOSED RULE IS:

- 4-137.001 Annual and Quarterly Reporting Requirements.
- (1) through (3) No change.
- (4) Manuals Adopted.
- (a) Annual and quarterly statements shall be prepared in accordance with the following manuals, which are hereby adopted and incorporated by reference:
- 1. The NAIC's Annual Statement Instructions, Property and Casualty, 2002 2001;
- 2. The NAIC's Annual Statement Instructions/Life, Accident and Health, 2002 2001; and
- 3. At the option of a life, accident, and health company or a property and casualty company whose policy and contract premiums, claims, and liabilities are 100% health insurance, the NAIC's Annual Statement Instructions/Health, 2002; and
- 4.3. The NAIC's Accounting Practices and Procedures Manual, as of March, 2002 2001.

Specific Authority 624.307, 624.308(1) FS. Law Implemented 624.307(1), 624.424(1) FS. History-New 3-31-92, Amended 8-24-93, 4-9-95, 4-9-97, 4-4-99, 11-30-99, 2-11-01, 4-5-01, 12-4-01, 12-25-01,

NAME OF PERSON ORIGINATING PROPOSED RULE: Kerry Krantz, Actuary, Bureau of Life and Health Insurer Solvency, Division of Insurer Services, Department of Insurance

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Thomas Streukens, Chief, Bureau of Life and Health Insurer Solvency, Division of Insurer Services, Department of Insurance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 16, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 3, 2002

DEPARTMENT OF INSURANCE

RULE TITLE:

NAIC Financial Examiners Handbook Adopted

PURPOSE AND EFFECT: The purpose of the proposed rule development is to adopt the current NAIC Financial Condition Examiners Handbook manuals.

SUMMARY: As amended, the rule would require the Department to follow the 2002 edition of NAIC's Financial Condition Examiners Handbook rather than the 2001 edition.

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: 624.308(1) FS.

LAW IMPLEMENTED: 624.307(1), 624.316(1)(c) 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:

TIME AND DATE: 2:00 p.m., Tuesday, July 9, 2002

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

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, (850)413-4214.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kerry Krantz, Actuary, Division of Insurer Services, Department of Insurance, 200 E. Gaines Street, 317B Larson Building, Tallahassee, FL 32399-0327, (850)413-4153

THE FULL TEXT OF THE PROPOSED RULE IS:

4-138.001 NAIC Financial Examiners Handbook Adopted.

(1) The National Association of Insurance Commissioners Financial Examiners Handbook Volume I, (2002 2001) is hereby adopted and incorporated by reference.

Specific Authority 624.308(1) FS. Law Implemented 624.307(1), 624.316(1)(c) FS. History–New 3-30-92, Amended 4-9-97, 4-4-99, 11-30-99, 2-11-01, 12-25-01,

NAME OF PERSON ORIGINATING PROPOSED RULE: Kerry Krantz, Actuary, Bureau of Life and Health Insurer Solvency, Division of Insurer Services, Department of Insurance NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Thomas Streukens, Chief, Bureau of Life and Health Insurer Solvency, Division of Insurer Services, Department of Insurance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 16, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 3, 2002

DEPARTMENT OF INSURANCE

| RULE TITLES: | RULE NOS.: |
|---|------------|
| Co-Payments | 4-191.035 |
| Filing, Approval of Subscriber Contract | |
| and Related Forms | 4-191.051 |
| Rates | 4-191.054 |
| Actuarial Memorandum and Definitions | 4-191.055 |
| Prescribed Forms | 4-191.107 |

PURPOSE AND EFFECT: The amendments are to make corrections to comply with statutory changes, to delete the requirement that all HMOs offer all plans with option of the existing PCP and out of pocket maximums, and to make technical corrections.

SUMMARY: The proposed rule address co-payment provisions, high deductible contracts, required form filings, loss ratio standards and viability prohibitions.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: 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: 641.36, 624.308(1) FS.

LAW IMPLEMENTED: 628.4615, 641.19(18), 641.20185, 641.21(1), 641.21(1)(e), 641.22(2), 641.26(1), 641.26(2), 641.29, 641.3007(4)(b), 641.3007(4)(c), 641.31(2), 641.31(3), 641.31(4), 641.3922(3) 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: 9:00 a.m., July 11, 2002

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Frank Dino, Actuary, Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance, 200 East Gaines Street, Tallahassee, Florida 32399-0328, phone (850)413-5014

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, (850)413-4214.

THE FULL TEXT OF THE PROPOSED RULE IS:

- 4-191.035 Co-Payments.
- (1) If required, co-payment will be paid when health care services and benefits are rendered. The HMO or contracted provider may asses the usual co-payment when a subscriber fails to keep a physician office visit or appointment, provided this is a standard procedure and a prior reminder remainder was issued to the subscriber of the scheduled appointment.
- (2) Co-payments in total shall not exceed the dollar amounts as determined by a formula which will be the HMO industry average annual reported commercial premium per member for the past two years. The formula is calculated as follows:
- (a) Total commercial premiums for the previous two (2) years divided by two (2) equals the total average annual commercial premium;
- (b) The total average annual commercial premium times 115 percent:
- (c) The total commercial enrollment for the previous two (2) years divided by two (2) equals total average commercial enrollment:
- (d) The total average annual commercial premium divided by the total average annual commercial enrollment equals the total average commercial premium per member.
- Co-payments for individuals will be limited to the average stated above, with a maximum of \$1,500.00; family co-payment limits shall be twice the average calculated above, with a maximum of \$3,000. Co-payments for the primary care provider shall not exceed \$15.00 per office visit. Co-payments for specialty care must be reasonable to ensure access to proper health care. Exceptions may be made if the HMO demonstrates an adverse effect on the financial condition or small group rating is involved and not in conflict with Rule 4-191.054.
- (3) A co-payment may be established which is a percentage of a specific dollar amount if the percentage co-payment is requested and justified by an employer group with 500 or more members residing in the State of Florida and involves a bidding process. Any request of this nature must be filed and approved by the Department on a specific case basis and the annual maximum co-payments must be expressed in specific dollar amounts of not more than the amount determined by the formula described in paragraph (2) of this rule.
- (2) The contract shall clearly define the co-payment required to be paid by the subscriber/member.
- (3) The contract shall clearly define any cost sharing features, the financial responsibility of the subscriber/member, and how the subscriber/member obligation is determined.
- (4) In the case of a high deductible contract, as defined in Section 641.20185, Florida Statutes, the deductible established under the contract must be satisfied before the application of any co-payments.

- Specific Authority 641.36 FS. Law Implemented 641.19(18), 641.20185, 641.31(4) FS. History–New 5-28-92, Amended_____.
- 4-191.051 Filing, Approval of Subscriber Contract and Related Forms.
 - (1) through (2) No change.
- (3) One Two copyies of each form filing shall be submitted at the time of filing. HMOs in possession of a Certificate of Authority shall submit all contract filings to the Bureau of Life and Health Forms and Rates, Division of Insurer Services and Market Conduct Review, Department of Insurance, Post Office Box 8040, Tallahassee, Florida 32301-8040 32399-0300, or submitted electronically to Ihfrbureau@doi.state.fl.us. All filings sent by Federal Express or any other form of special delivery shall be delivered to: Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance, 1st Floor, Larson Building, 200 East Gaines Street, Tallahassee, FL. 32399-0328.
- (4)(a) Each HMO shall provide <u>one two copyies</u> of a written informed consent notice used to disclose the intent of testing a person for HIV infection or other specific sickness as required in Section 641.3007(4)(b), <u>Florida Statutes</u> F.S. The form shall include the following:
 - 1. Explanation of the testing;
 - 2. Purpose of the test;
 - 3. Potential uses of the form information and limitations;
 - 4. The meaning of the test results; and
- 5. Person's rights to confidential treatment of the information obtained.
 - (b) No change.
- (5) Each HMO shall include a copy of the following forms:
- (a) Form DI4-1507, The Florida Department of Insurance, Treasurer and Fire Marshal Life and Health Forms and Rates Universal Standardized Data Letter, completely filled out in accordance with Form DI4-1507A, The Florida Department of Insurance, Treasurer and Fire Marshal Life and Health Forms and Rates Universal Standardized Data Letter Instruction Sheet, as adopted in Rule 4-149.022, F.A.C.
- (b) Form DI4-1356, The Florida Department of Insurance, Treasurer and Fire Marshal Florida HMO Contract Checklist (Includes Individual, Large and Small Group), as adopted in Rule 4-149.022, F.A.C.

Specific Authority 641.36 FS. Law Implemented 641.21(1)(e), 641.3007(4)(b),(c), 641.31(2),(3) FS. History-New 2-22-88, Amended 10-25-89, Formerly 4-31.051, Amended 5-28-92.

4-191.054 Rates.

(1) Before charging or quoting premiums to subscribers, an HMO shall file the rating methodology by which those premiums were determined with the Department.

- (a) All materials submitted shall be legible. A filing which is illegible or which contains illegible material will be disapproved without any further processing.
- (b) For purposes of this rule and Rule 4-191.055, F.A.C., and the time periods established in Section 641.31, Florida Statutes, a filing is considered "filed" with the Department upon receipt of the material required in paragraph (2)(a), below. For purposes of this rule and Rule 4-191.055, F.A.C., the term "filed" does not mean "approved". Such premiums may be put into effect immediately, but the Department retains the right to disapprove the methodologies and the rates filed. If formally disapproved, use of the rating methodologies shall be discontinued immediately and shall not be applicable to new or renewal business written on or after the effective date of the filing. New rating methodologies which respond to the findings of the Department shall be filed by the HMO. If the Department finds that premiums charged were excessive, inadequate, or unfairly discriminatory in the original filing, the premiums determined by the newly filed rating methodology shall be applicable only to new or renewal business written on or after the effective date of the responsive filing.
- (2) Filings of rating methodologies shall provide adequate information, so that the Department, in accordance with generally accepted actuarial principles as applied to Health Maintenance Organizations, may verify that the rating methodology does not produce inadequate, excessive, or unfairly discriminatory premiums. All rate classifications should be clearly identified, and the formulas and/or methods of calculating premiums adequately described, as defined in Rule 4-191.055, F.A.C.
- (a) The hard copy components of HMO rate filings shall consist of one two copyies of all of the items in subparagraphs 1. through 4.3.
 - 1. through 3. No change.
- 4. Form DI4-1507, The Florida Department of Insurance, Treasurer and Fire Marshal Life and Health Forms and Rates Universal Standardized Data Letter, completely filled out in accordance with Form DI4-1507A, The Florida Department of Insurance, Treasurer and Fire Marshal Life and Health Forms and Rates Universal Standardized Data Letter Instruction Sheet, as adopted in Rule 4-149.022, F.A.C.
- (b) Filings, as that term is defined in subsection (a), shall be mailed to: Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance, Post Office Box 8040, Tallahassee, Florida 32301-8040 32314-5340 or submitted electronically to lhfrbureau@doi.state.fl.us. All filings sent to the Department by Federal Express or any other form of special delivery shall be delivered to: Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance, 1st Floor, Larson Building, 200 East Gaines Street, Tallahassee, FL 32399-<u>0328</u> 3201.

- (c)1. Every HMO submitting a rate filing shall be notified as to whether the filing has been affirmatively approved by the Department, or has been disapproved by the Department, including disapprovals for failure of the material to meet the definition of a "filing" or for illegibility, within any statutory review period of the date of receipt of the filing.
- <u>2.</u> Every HMO submitting a rate filing which does not comply with the requirement of Rules 4-191.054 and 4-191.055, F.A.C., or for which the Department determines that additional information is necessary for a proper review, will be notified of the <u>additional information necessary deficiencies in the filing</u> within the statutory time limit.
- <u>3.</u> Every HMO shall submit the required data by a date certain stated in the <u>clarification</u> deficiency letter to allow the Department sufficient time to perform a proper review.
- <u>4.</u> Failure to correct the <u>filing deficiencies</u> by the date certain in the <u>clarification</u> <u>deficiency</u> letter will result in an affirmative disapproval <u>of the filing</u> by the Department.
 - (3) through (5) No change.
- (6)(a) Rates for group conversion contracts, issued on a group or on an individual basis are exempt from the loss ratio requirements below. The loss ratio for group conversion contracts shall not be less than 120%. The premium for a converted contract may not exceed 200 percent of the standard risk rate, as published in Chapter 4-149, Part X, F.A.C.
 - (a) through (b) renumbered (b) through (c) No change.
 - (7) through (8) No change.
- (9) Each HMO shall make an annual filing with the Department for each policy form no later than 12 months after the date of approval of its previous filing for the policy form, demonstrating the reasonableness of benefits in relation to premium rates.
- (a) The first such filing for each policy form for each company shall be submitted on or after December 1, 1996, but in no event later than March 1, 1997, or 14 months after the date of the last rate filing approval.
- (b) Subsequent rate filings shall be submitted no later than 12 months after the previous filing approval date for each policy form.
- (10) Prohibitions. A premium schedule is unfairly discriminatory if it incorporates any of the following: The Department has determined that certain rating activities are against the public policy of this state and are therefore prohibited because the activities may result in premium escalations which are not viable for the subscriber or result in unfair discrimination in sales practices, an example of which is inappropriate risk selection criteria.
- (a) Select and Ultimate Premium Schedules, as defined in Rule 4-191.055(4)(j), F.A.C., are prohibited.
- (b) Attained age premium schedules where the slope by age is substantially different from the slope of the ultimate claim cost curve are prohibited. Attained age premium schedules are defined in Rule 4-191.055(4)(a), F.A.C.

Specific Authority 641.36 FS. Law Implemented 641.21(1)(e), 641.22(2),(6). 641.31(2),(3), 641.3922(3) FS. History-New 2-22-88, Amended 10-25-89, Formerly 4-31.054, Amended 10-8-96.______

- 4-191.055 Actuarial Memorandum and Definitions.
- (1)(a) In order for a rate filing to be reviewed properly by the Department, the actuarial memorandum required by Rule 4-191.054(2)(a)2., F.A.C., shall contain the items listed in subsection (2), below, for a new product filing, a rate revision or justification of existing rates.
- (b)1. Pricing assumptions shall reflect HMO experience to the degree credible, and industry experience where HMO experience is not credible, available or appropriate.
- 2. Assumptions shall reflect what the HMO fully expects to occur, rather than assumptions developed primarily for rate filing purposes, based on sound actuarial principles.
- 3. All such items shall be adequately justified by supporting data. In reviewing these assumptions, the Department will use, as an initial point of reference, comparisons of the assumptions with those from similar products of the same HMO, similar products of other HMOs and independent studies.
- 4. Additional information will be required if, given the particular facts and circumstances of the filing, the Department determines that the additional information is necessary to properly complete its review of the filing to determine if the benefits are reasonable in relation to the premiums charged.
- (c) All filings reviewed under Rules 4-191.054 through 4-191.055, F.A.C., shall be reviewed in accordance with sound actuarial principles and, except where the context plainly does not involve an actuarial determination, all adverbs in these rules such as "properly" and "appropriately" shall be construed in light of those principles.
 - (2) No change.
 - (3) Descriptions.
 - (a) No change.
- (b) The descriptions, by item number, of the terms listed above in subsection (2) follow:
 - 1. through 15. No change.
- 16. Minimum Required Loss Ratio for the Form: This section shall state the minimum required loss ratio for the form as defined in Rule 4-191.054(6)(a) and (b), F.A.C.
- 17. Loss Ratio: This loss ratio is defined in Rule 4-191.054(6)(c)(b), F.A.C.
 - 18. through 24. No change.
 - (4) Definitions.
 - (a) No change.
 - (b) Credible Data:
- 1. If a policy form has 2000 or more subscribers inforce, then full (100%) credibility is given to the experience; if fewer than 500 subscribers are inforce, then zero (0%) credibility is given. Linear interpolation is used for inforce amounts between 500 and 2000.

- 2. For group policy forms, the numbers in this definition refer to group subscribers certificates.
- 3. A combination of Florida and industry data shall be used only if Florida-only data is not fully credible.
 - (c) No change.
- (d) Group Size: For Group HMO Policy Forms the group size is the average number of subscribers certificates per employer.
 - (e) through (h) No change.
 - (i) Renewal Clauses:
- 1. Optionally Renewable means that renewal can be declined on any individual or group contract at the option of the HMO
- 2. Conditionally Renewable means that renewal can be declined by class, by geographic area or for stated reasons other than deterioration of health. The HMO may revise rates on a class basis.
- 3. Guaranteed Renewable means that renewal cannot be declined by the HMO for any reason other than those detailed in Sections 641.31074, and 627.6425, Florida Statutes, fraud, misrepresentation, or failure to pay the premium when due, but the HMO can revise rates on a class basis.
- 4. Non-Cancelable means that renewal cannot be declined for any reason other than fraud, misrepresentation, or failure to pay the premium when due and that rates cannot be revised by the HMO.
- 5. Non-Renewable means that there is a contractual provision which prevents a policy duration of more than a specific period which shall be no more than one (1) year.
 - (j) through (k) No change.

Specific Authority 641.36 FS. Law Implemented 641.22(2), 641.31(2),(3) FS. History-New 10-8-96, Amended 4-20-98,

- 4-191.107 Prescribed Forms.
- (1) The forms listed below are incorporated into, and made a part of, these rules by reference.

| FORM | | DATE | OF | LATEST |
|--------|-------------|-------|-----|--------|
| NUMBER | DESCRIPTION | REVIS | ION | |

(a) through (t) No change.

| (u) | DI4-563 | Health Maintenance Organizations | 10/91 |
|----------------|---------|----------------------------------|-------|
| | | Requirements Summary | |
| (v) | DI4-564 | Standardized Data Letter Health | 10/91 |
| | | Maintenance Organizations | |

(2) Form DI4-1507, Form DI4-1507A, and Form DI4-1356 as incorporated in Rule 149.022, F.A.C., are also used for purposes of this rule chapter.

(3)(2) Copies of all forms listed in subsection (1) above may be obtained through the Department of Insurance, Bureau of Specialty Insurers, Tallahassee, Florida 32399-0300.

Specific Authority <u>624.308(1)</u>, 641.36 FS. Law Implemented <u>627.410(6)</u>,(7), <u>627.413(4)</u>, <u>627.4145</u>, <u>627.6735</u>, <u>627.6699(12)(d)4</u>, <u>627.682</u>, <u>627.9701</u>, 628.4615, 641.19(13)(d), 641.21(1), 641.26(1),(2), 641.29 FS. History-New 2-22-88, Amended 10-25-89, Formerly 4-31.107, Amended 5-28-92, 8-15-94,

NAME OF PERSON ORIGINATING PROPOSED RULE: Frank Dino, Actuary, Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Rich Robleto, Bureau Chief, Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 13, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: March 29, 2002

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Accountancy

| RULE TITLES: | RULE NOS.: |
|--|-----------------|
| Generally Accepted Accounting Principles | 61H1-20.007 |
| Generally Accepted Auditing Standards | 61H1-20.008 |
| Standards for Accounting and | |
| Review Services | 61H1-20.009 |
| Governmental Accounting Standards | 61H1-20.0091 |
| Governmental Auditing Standards | 61H1-20.0092 |
| Rules of the Auditor General | 61H1-20.0093 |
| Standards for Prospective | |
| Financial Statements | 61H1-20.0094 |
| Standards for Management | |
| Advisory Services | 61H1-20.0095 |
| Standards for Tax Practice | 61H1-20.0096 |
| Standards for Personal Financial Planning | 61H1-20.0097 |
| Standards for Business Valuations | 61H1-20.0098 |
| Standards for Attestation Engagements | 61H1-20.0099 |
| PURPOSE AND EFFECT: The Board propose | es to amend the |
| above-referenced rules to update the effective | ve dates of the |

American Standards as published by the American Institute of Certified Public Accountants and the Governmental Accounting Standards Board.

SUMMARY: These rules define terms relating to accounting principles and standards of the American Institute of Certified Public Accountants and the Governmental Accounting Standards Board as utilized in the provision of accounting services.

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: 473.302, 473.304, 473.315 FS.

LAW IMPLEMENTED: 473.303, 473.315 FS.

IF REOUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW. (IF NOT REQUESTED IN WRITING, A HEARING WILL NOT BE HELD):

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Martha Willis, Executive Director, Board of Accountancy, 240 N. W. 76 Drive, Suite 1, Gainesville, Florida 32607

THE FULL TEXT OF THE PROPOSED RULE IS:

61H1-20.007 Generally Accepted Accounting Principles. "Generally Accepted Accounting Principles" shall be deemed and construed to mean accounting principles or standards generally accepted in the United States of America in effect as of June 30, 2002, including, but not limited to, Accounting Principles Board Opinions Nos. 1 to 31 as published by the American Institute of Certified Public Accountants, and statements of accounting standards Statements of Financial Accounting Standards and interpretations thereof, as published by the Financial Accounting Standards Board (FASB), the Governmental Accounting Standards Board (GASB) and the Federal Accounting Standards Advisory Board (FASAB). The FASB materials are entitled Original Pronouncements 2001/2002 Edition, vols. I, II, & III available from FASB, 401 Merritt 7, P.O. Box 5116, Norwalk, CT 06850-5116, http://www.cpa2biz.com). The GASB (888)777-7077, materials are entitled Governmental Accounting and Financial Reporting Standards, (Statement 34 Edition), available from GASB, 401 Merritt 7, P. O. Box 5116, Norwalk, CT The FASAB materials are entitled FASAB 06850-5116). Statements 1-22 and are available from FASAB, 750 First Street, Suite 1001, Washington, D.C. 20002, (202)512-7350) in effect as of June 30, 1997.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 12-4-79, Amended 2-3-81, 3-16-81, 1-25-82, 7-6-82, 12-9-82, 7-27-83, 3-22-84, 7-2-85, Formerly 21A-20.07, Amended 9-23-86, 5-22-88, 4-8-90, 4-21-91, Formerly 21A-20.007, Amended 10-19-94, 9-30-97,

61H1-20.008 Generally Accepted Auditing Standards.

"Generally Accepted Auditing Standards" shall be deemed and construed to mean auditing standards generally accepted in the United States of America in effect as of June 30, 2002, including, but not limited to, general, field work and reporting standards approved and adopted by the membership of the American Institute of Certified Public Accountants (AICPA), as amended by the AICPA Auditing Standard Board (ASB) and standards promulgated by the ASB in the form of

Statements on Auditing Standards (entitled Codification of Statements on Auditing Standards, (including Statements on Standards for Attestation Engagements) Numbers 1 to 93 available from the AICPA's Resource Online at www.cpa2biz.com or call 1-888-777-7077). the ten generally accepted auditing standards adopted by the American Institute of Certified Public Accountants, together with interpretations thereof, as set forth in Statements on Auditing Standards as published by the American Institute of Certified Public Accountants in effect as of June 30, 1997.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 12-4-79, Amended 3-16-81, 7-6-82, 12-9-82, 7-27-83, 3-22-84, 7-2-85, Formerly 21A-20.08, Amended 9-23-86, 5-22-88, 4-8-90, 4-21-91, Formerly 21A-20.008, Amended 10-19-94, 9-30-97,

61H1-20.009 Standards for Accounting and Review Services.

"Standards for Accounting and Review Services" shall be deemed and construed to mean Statements on Standards for Accounting and Review Services published by the American Institute of Certified Public Accountants in effect as of June 30, 2002 1997. (Entitled Codification of Statements on Standards for Accounting and Review Services, Numbers 1-8, available from the AICPA's Resource Online at www.cpa2biz.com or call 1(888)777-7077.)

Specific Authority 473,304, 473,315 FS. Law Implemented 473,315 FS. History–New 12-4-79, Amended 3-16-81, 1-25-82, 7-6-82, 12-9-82, 7-27-83, 3-22-84, 7-2-85, Formerly 21A-20.09, Amended 9-23-86, 5-22-88, 4-8-90, 4-21-91, Formerly 21A-20.009, Amended 10-19-94, 9-30-97,

61H1-20.0091 Governmental Accounting Standards.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.304, 473.315 FS. History-New 10-28-86, Amended 5-22-88, 4-8-90, 4-21-91, Formerly 21A-20.0091, Amended 10-19-94, 9-30-97, Repealed

61H1-20.0092 Governmental Auditing Standards.

"Governmental Auditing Standards" shall be deemed and construed to mean Government Audit Standards issued by the Comptroller General of the United States, in effect as of June 30, 2002. (Entitled Government Auditing Standards, 1994 Revision, and its Amendments entitled Government Auditing Standards Amendment No. 1, Documentation Requirements When Assessing Control Risk at Maximum for Controls Significantly Dependent Upon Computerized Information Systems, GAO/A-GAGAS-1, revised May 1999. Amendment No. 2, Auditor Communication, revised July 1999 available from the United States General Accounting Office, Washington D.C. 20548-0001). Standards for Audits of Governmental Organizations, Programs, Activities and Functions issued by the Comptroller General of the United States in effect as of June 30, 1997.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.304, 473.315 FS. History-New 10-28-86, Amended 5-22-88, 4-8-90, 4-21-91, Formerly 21A-20.0092, Amended 10-19-94, 9-30-97,

61H1-20.0093 Rules of the Auditor General Standards for Local Governmental Entity Audits.

"Rules of the Auditor General" Standards for Local Governmental Entity Audits" shall be deemed and construed to mean the following Rules of the Auditor General of the State of Florida, in effect as of June 30, 2002:

| Chapter | Title |
|---------|---|
| _ | 1 THE |
| 10.550 | Local Government Entity Audits |
| 10.650 | State Single Audits – Non-profit and For-profit |
| | <u>Organizations</u> |
| 10.700 | Audits of Direct-Support Organizations |
| 10.800 | District School Board Audits |
| 10.850 | Charter School Audits |

These rules are available from the State of Florida, Auditor Office or from http://www.state.fl.us/audgen, under the Rules and Guidelines section. Chapter 10.550--10.559, Rules of the Auditor General of the State of Florida, Local Governmental Entity Audits in effect as of June 30, 1997.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 10-22-86, Amended 5-22-88, 4-8-90, 4-21-91, Formerly 21A-20.0093, Amended 9-30-97,

61H1-20.0094 Standards for Prospective Financial Statements.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 3-22-89, Amended 4-8-90, 4-21-91, Formerly 21A-20.0094, Amended 9-30-97, Repealed

61H1-20.0095 Standards for Management Advisory Services.

"Standards for Consulting Services" Standards for Management Advisory Services shall be deemed and construed to mean Statements on Standards for Consulting Services, Statement on Standards for Management Advisory Services published by the American Institute of Certified Public Accountants, CPAs in effect as of June 30, 2002 1997, available from the AICPA's Resource Online at www.cpa2biz.com or call 1(888)777-7077).

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 5-20-91, Formerly 21A-20.0095, Amended 9-30-97,__

61H1-20.0096 Standards for Tax Practice.

"Standards for Tax Services" Standards for Tax Practice shall be deemed and construed to mean Statements on Standards for <u>Tax Services</u>, Statement and Responsibilities in Tax Practice as published by the American Institute of Certified Public Accountants, CPAs in effect as of June 30, 2002 1997.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 5-20-91, Formerly 21A-20.0096, Amended 9-30-97,

61H1-20.0097 Standards for Personal Financial Planning. "Standards for Personal Financial Planning" shall be deemed and construed to mean Statements on Responsibilities in Personal Financial Planning Practice, "Statement on Responsibilities in Personal Financial Planning" as published by the American Institute of Certified Public Accountants. CPAs in effect as of June 30, 2002 1997, available from the AICPA's Resource Online at www.cpa2biz.com or call 1(888)777-7077).

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 11-8-95, Amended 9-30-97,

61H1-20.0098 Standards for Business Valuations.

"Standards for Business Valuations" shall be deemed and construed to mean "Consulting Services Practice Aid 93-3, Conducting a Valuation of a Closely Held Business," as published by the American Institute of Certified Public Accountants, in effect as of June 30, 2002 1997. (Available from the AICPA's Resource Online at www.cpa2biz.com or call 1(888)777-7077.)

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 11-8-95, Amended 9-30-97.

61H1-20.0099 Standards for Attestation Engagements.

"Standards for Attestation Engagements" shall be deemed and construed to mean Statements on Standards for Attestation Engagements, Statements on Standards for Attestation Engagements published by the American Institute of Certified Public Accountants, (entitled Codification of Statements on Standards for Attestation Engagements, available from the AICPA's Resource Online at www.cpa2biz.com or call 1(888)777-7077), in effect as of June 30, 2002 1997.

Specific Authority 473.304, 473.315 FS. Law Implemented 473.315 FS. History-New 9-29-96, Amended 6-22-98,

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Accountancy

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October, 2001

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: March 23, 2001

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DOCKET NO.: 02-27R

| RULE CHAPTER TITLE: | RULE CHAPTER NO.: |
|-----------------------------------|-------------------|
| Hazardous Waste | 62-730 |
| RULE TITLES: | RULE NOS.: |
| Definitions | 62-730.020 |
| References, Variances and | |
| Case-by-Case Regulations | 62-730.021 |
| Identification of Hazardous Waste | 62-730 030 |

| Standards Applicable to Generators | |
|--|----------------|
| of Hazardous Waste | 62-730.160 |
| Standards Applicable to Transporters | |
| of Hazardous Waste | 62-730.170 |
| Standards Applicable to Owners and | |
| Operators of Hazardous Waste | |
| Treatment, Storage and | |
| Disposal Facilities | 62-730.180 |
| Standards for the Management of | |
| Specific Hazardous Wastes and | |
| Specific Types of Hazardous | |
| Waste Management Facilities | 62-730.181 |
| Land Disposal Restrictions | 62-730.183 |
| Adoption of Federal Procedures | |
| for Decision Making | 62-730.184 |
| Standards for Universal Waste Management | 62-730.185 |
| Applications for Permits | 62-730.220 |
| PURPOSE, EFFECT AND SUMMARY: The pr | |
| amendments incorporate by reference the changes | |
| federal hazardous waste regulations by the U.S. Er | |
| Protection Agency between July 1, 2000 and Ap | |
| The Department is authorized by the federal go | |
| administer parts of the hazardous waste program. A | |
| that authorization, the Department must adopt of | - |
| make its rules equivalent to the existing federal | |
| These amendments serve to make the state rules e | • |
| the existing federal regulations. The full text of t | this notice is |
| published on the Internet at the Department of Er | |
| Protection's home page at http://www.dep.state.fl | us under the |

DEPARTMENT OF HEALTH

link or button titled "Official Notices".

Board of Dentistry

RULE TITLE: RULE NO.: Advertising and Soliciting by Dentists 64B5-4.002 PURPOSE AND EFFECT: This rule is being amended to update the rule text of subsection (3).

SUMMARY: This rule sets forth the criteria for advertising and soliciting by dentists.

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: 466.004(4), 466.019 FS. LAW IMPLEMENTED: 466.019, 466.028(1)(d) FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW. (IF NOT REOUESTED IN WRITING, A HEARING WILL NOT BE HELD)

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Sue Foster, Executive Director, Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3254

THE FULL TEXT OF THE PROPOSED RULE IS:

64B5-4.002 Advertising and Soliciting by Dentists.

- (1) through (2) No change.
- (3) No dentist shall disseminate or cause the dissemination of any advertisement or advertising which is in any way fraudulent, false, deceptive, or misleading in form or content. Additionally, no dentist shall disseminate or cause the dissemination of any advertisement or advertising which:
 - (a) through (f) No change.
- (g) Is intended or is likely to appeal primarily to a layperson's fears.
 - (4) through (6) No change.

Specific Authority 466.004(4), 466.019 FS. Law Implemented 466.019, 466.028(1)(d) FS. History-New 7-7-87, Amended 1-11-89, 10-29-90, 4-24-91, 7-14-92, Formerly 21G-4.002, Amended 3-30-94, Formerly 61F5-4.002, 59Q-4.002, Amended 5-20-01,

NAME OF PERSON ORIGINATING PROPOSED RULE: **Board of Dentistry**

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 4, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: April 19, 2002

DEPARTMENT OF HEALTH

Board of Dentistry

| RULE TITLES: | RULE NOS.: |
|---|-------------|
| Definitions | 64B5-14.001 |
| Prohibitions | 64B5-14.002 |
| Training, Education, Certification, and | |
| Requirements for Issuance of Permit | 64B5-14.003 |
| Additional Requirements | 64B5-14.004 |
| Application for Permit | 64B5-14.005 |
| Reporting Adverse Occurrences | 64B5-14.006 |
| Inspection of Facilities | 64B5-14.007 |
| Conscious Sedation | 64B5-14.009 |
| DUDDOCE AND EFFECT: The numerous | of the rule |

PURPOSE AND EFFECT: The purpose of the rule amendments is to include enteral forms of sedation within the requirements imposed by these rules.

SUMMARY: These rules address different types of sedation to be utilized by Florida dentists. They define terminology utilized in the rules; list prohibitions regarding sedation, give training, education, certification and requirements for issuance of permits necessary; state who may and may not monitor different types of sedation; how to apply for a permit; state reporting requirements; requirements for inspection of facilities; and set forth additional requirements for conscious sedation.

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: 466.004, 466.017 FS.

LAW IMPLEMENTED: 120.60(8), 466.017 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Sue Foster, Executive Director, Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3254

THE FULL TEXT OF THE PROPOSED RULES IS:

64B5-14.001 Definitions.

- (1) Anesthesia No change.
- (2) General anesthesia A controlled state of unconsciousness, produced by a pharmacologic agent, accompanied by a partial or complete loss of protective reflexes, including inability to independently maintain an airway and respond purposefully to physical stimulation or verbal command. This modality includes administration of medications via parenteral routes; that is: intravenous, intramuscular, subcutaneous, submucosal, or inhalation, as well as enteral routes, that is oral, rectal, or transmucosal.
- (3) Deep Sedation A controlled state of depressed consciousness accompanied by partial loss of protective reflexes, including either or both the inability to continually maintain an airway independently or to respond appropriately to physical stimulation or verbal command, produced by pharmacologic or non-pharmacologic method or combination thereof. Deep sedation includes administration of medications via parenteral routes; that is intravenous, intra muscular, subcutaneous, submucosal, or inhalation, as well as enteral routes, that is oral, rectal or transmucosal.
- (4) Conscious Parenteral conscious sedation A depressed level of consciousness produced by the parenteral administration of pharmacologic substances, that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and or verbal command. This modality includes administration of medications via all parenteral routes: that is, intravenous, intramuscular, subcutaneous, submucosal, or inhalation, as well as enteral routes; that is oral, rectal, or transmucosal. The

drugs, and techniques used should carry a margin of safety wide enough to render unintended loss of consciousness unlikely.

- (5) through (8) No change.
- (9) Office team approach A methodology employed by a dentist in the administration of general anesthesia, deep sedation, parenteral conscious sedation, and pediatric sedation whereby the dentist uses one or more qualified assistants/dental hygienists who, working under the direct supervision of the dentist, assist the dentist, and assist in emergency care of the patient.
- (10) Anxiolysis The preoperative use of medication to relieve anxiety before or during a dental procedure which does not produce a depressed level of consciousness and maintains the patient's ability to continually maintain an airway independently or to respond appropriately to physical stimulation and verbal command. The requirements contained in these rules are not applicable to the use of medication for the purpose of providing anxiolysis but not intended to induce sedation.

Specific Authority 466.004(4), 466.017(3) FS. Law Implemented 466.017(3) FS. History-New 1-31-80, Amended 4-7-86, Formerly 21G-14.01, Amended 12-31-86, 6-1-87, 9-1-87, 2-1-93, Formerly 21G-14.001, Amended 12-20-93, Formerly 61F5-14.001, Amended 8-8-96, Formerly 59Q-14.001, Amended

64B5-14.002 Prohibitions.

- (1) No change.
- (2) <u>Conscious</u> <u>Parenteral conscious</u> sedation. Beginning November 1, 1986, no dentists licensed in this State, including those authorized to administer <u>parenteral</u> conscious sedation subsequent to January 31, 1982, shall administer <u>parenteral</u> conscious sedation in the practice of dentistry until they have obtained a permit as required by the provisions of this rule chapter.
 - (3) through (6) No change.

Specific Authority 466.004(4), 466.017(3) FS. Law Implemented 466.017(3) FS. History-New 1-31-80, Amended 4-20-81, 2-13-86, Formerly 21G-14.02, 21G-14.002, Amended 12-20-93, Formerly 61F5-14.002, Amended 8-8-96, Formerly 59Q-14.002, Amended

64B5-14.003 Training, Education, Certification, and Requirements for Issuance of Permits.

- (1) General Anesthesia Permit.
- (a) A permit shall be issued to an actively licensed dentist authorizing the use of general anesthesia or deep sedation at a specified practice location or locations on an outpatient basis for dental patients provided the dentist:
 - 1. through 5. No change.
 - (b) through (c) No change.
- (d) A dentist permitted to administer general anesthesia or deep sedation under this rule may administer parenteral conscious sedation and nitrous-oxide inhalation conscious sedation.
 - (e) No change.

- (2) Parenteral Conscious Sedation Permit.
- (a) A permit shall be issued to a dentist authorizing the use of parenteral conscious sedation at a specified practice location or locations on an outpatient basis for dental patients provided such dentist:
- 1. Has received formal training in the use of parenteral conscious sedation; and
- 2. Is certified by the institution where the training was received to be competent in the administration of parenteral conscious sedation; and
- 3. Is competent to handle all emergencies relating to parenteral conscious sedation.
 - (b) through (c) No change.
- (d) A dentist utilizing parenteral conscious sedation shall maintain a properly equipped facility for the administration of parenteral conscious sedation, staffed with supervised assistant/dental hygienist personnel, capable of reasonably handling procedures, problems, and emergencies incident thereto. The facility must have the equipment capability of delivering positive pressure oxygen ventilation. Administration of parenteral conscious sedation requires at least two individuals: a dentist, and an auxiliary trained in basic cardiac life support. It shall be incumbent upon the operating dentist to insure that the patient is appropriately monitored.
- (e) A dentist utilizing parenteral conscious sedation and his assistant/dental hygienist personnel shall be certified in an American Heart Association or American Red Cross or equivalent agency sponsored cardiopulmonary resuscitation course at the basic life support level to include one man CPR, two man CPR, infant resuscitation, and obstructed airway with a periodic update not to exceed two years. Starting with the licensure biennium commencing on March of 2000, a dentist and all assistant/dental hygienist personnel shall also be trained in the use of either an Automated External Defibrillator or a defibrillator and electrocardiograph as part of their cardiopulmonary resuscitation course at the basic life support level. In addition to CPR certification, a dentist utilizing parenteral conscious sedation must be currently trained in ACLS (Advanced Cardiac Life Support) or ATLS (Advanced Trauma Life Support).
- (f) Dentists permitted to administer parenteral conscious sedation may administer nitrous-oxide inhalation conscious sedation.
- (g) Dentists permitted to administer parenteral conscious sedation may administer pediatric conscious sedation in compliance with Rule 64B5-14.010, F.A.C.
 - (3) Pediatric Conscious Sedation Permit.
- (a) A permit shall be issued to a dentist authorizing the use of pediatric conscious sedation at a specified practice location or locations on an outpatient basis for dental patients provided such dentist:
 - 1. through 3. No change.
 - (b) through (c) No change.

- (d) Dentists permitted to administer parenteral conscious sedation may administer pediatric conscious sedation.
 - (4) Nitrous-Oxide Inhalation Analgesia.
- (a) A dentist may employ or use nitrous-oxide inhalation analgesia on an outpatient basis for dental patients provided such dentist:
 - 1. through 3. No change.
 - (b) through (c) No change.
- (d) Nitrous oxide may not be used in combination with oral sedative drugs to achieve a depressed level of consciousness unless the administering dentist holds a parenteral conscious sedation permit issued in accordance with subsection 64B5-14.003(2), F.A.C., or a pediatric conscious sedation permit issued in accordance with Rule 64B5-14.010, F.A.C.

Specific Authority 466.004(4), 466.017(3) FS. Law Implemented 466.017(3) FS. History-New 1-31-80, Amended 4-20-81, 2-13-86, Formerly 21G-14.03, Amended 12-31-86, 11-8-90, 2-1-93, Formerly 21G-14.003, Amended 12-20-93, Formerly 61F5-14.003, Amended 8-8-96, 10-1-96, Formerly 59Q-14.003, Amended 2-17-98, 12-20-98, 5-31-00, 6-7-01,

64B5-14.004 Additional Requirements.

- (1) Office Team A dentist licensed by the Board and practicing dentistry in Florida and who is permitted by these rules to induce and administer general anesthesia, deep sedation, parenteral conscious sedation, pediatric conscious sedation or nitrous-oxide inhalation analgesia may employ the office team approach.
- (2) Dental Assistants, Dental Hygienists Dental assistants and dental hygienists may monitor nitrous-oxide inhalation analgesia under the direct supervision of a dentist who is permitted by rule to use general anesthesia, parenteral conscious sedation, pediatric conscious sedation, or nitrous-oxide inhalation analgesia, while rendering dental services allowed by Chapter 466, Florida Statutes, and under the following conditions:
 - (a) through (b) No change.
 - (3) through (4) No change.
- (5) A dentist utilizing parenteral conscious sedation in the dental office may induce only one patient at a time. A second patient shall not be induced until the first patient is awake, alert, conscious, spontaneously breathing, has stable vital signs, is ambulatory with assistance, is under the care of a responsible adult, and that portion of the procedure requiring the participation of the dentist is complete. In an office setting where two or more permit holders are present simultaneously, each may sedate one patient provided that the office has the necessary staff and equipment, as set forth in paragraph 64B5-14.003(2)(d), F.A.C., for each sedated patient.

Specific Authority 466.004(4), 466.017(3) FS. Law Implemented 466.017(3) FS. History-New 1-31-80, Amended 2-13-86, Formerly 21G-14.04, Amended 12-31-86, 12-28-92, Formerly 21G-14.004, Amended 12-20-93, Formerly 61F5-14.004, Amended 8-8-96, Formerly 59Q-14.004, Amended

64B5-14.005 Application for Permit.

- (1) No dentist shall administer, supervise or permit another health care practitioner, as defined in subsection 456.001, F.S., to perform the administration of general anesthesia, deep sedation, parenteral conscious sedation or pediatric conscious sedation in a dental office for dental patients, unless such dentist possesses a permit issued by the Board. A permit is required even when another health care practitioner, as defined in subsection 456.001, F.S., administers general anesthesia, deep sedation, parenteral conscious sedation, or pediatric conscious sedation in a dental office for a dental patient. The dentist holding such a permit shall be subject to review and such permit must be renewed biennially. Nothing herein shall be read to authorize the administration of any anesthesia by a health care practitioner who is permitted to administer anesthesia pursuant to their own professional license. All dentists in a practice who perform the administration of general anesthesia, deep sedation, parenteral conscious sedation or pediatric conscious sedation shall each possess an individual permit.
 - (2) through (3) No change.
- (4) An application for a parenteral conscious sedation permit must include the application fee specified in Rule 64B5-15.017, F.A.C., which is non-refundable; the permit fee specified in Rule 64B5-15.018, F.A.C., which may be refunded if the application is denied without inspection of the applicant's facilities; evidence indicating compliance with all the provisions of this chapter; and identification of the location or locations at which the licensee desires to be authorized to use or employ parenteral conscious sedation.
 - (5) through (6) No change.
- (7) The holder of any general anesthesia, parenteral conscious sedation, or pediatric conscious sedation permit is authorized to practice pursuant to such permit only at the location or locations previously reported to the Board office.

Specific Authority 466.004, 466.017 FS. Law Implemented 466.017 FS. History-New 4-7-86, Amended 1-29-89, 11-16-89, 11-8-90, 4-24-91, Formerly 21G-14.005, Amended 12-20-93, Formerly 61F5-14.005, Amended 8-8-96, Formerly 59Q-14.005, Amended 12-12-00,

64B5-14.006 Reporting Adverse Occurrences.

(1) Any dentist practicing in the State of Florida must notify the Board in writing by registered mail, postmarked within 48 hours of any mortality or other incident occurring in the dentist's outpatient facilities. A complete written report shall be filed with the Board within 30 days of the mortality or other incident. Incidents which shall be reported are those which result in temporary or permanent physical or mental injury requiring hospital emergency room treatment and/or hospitalization of a patient during, or as a direct result of the use of general anesthesia, deep sedation, parenteral conscious sedation, pediatric conscious sedation, oral sedation, nitrous oxide, or local anesthesia during or related to a dental procedure. The report shall include at minimum, responses to the following:

- (a) through (e) No change.
- 1. through 3. No change.
- (f) No change.
- (2) No change.

Specific Authority 466.004(4), 466.017(3) FS. Law Implemented 466.017(3) FS. History-New 2-12-86, Amended 3-27-90, Formerly 21G-14.006, Amended 12-20-93, Formerly 61F5-14.006, Amended 8-8-96, Formerly 59Q-14.006, Amended

64B5-14.007 Inspection of Facilities.

- (1) The Chairman of the Board or the Board by majority vote shall appoint consultants who are Florida licensed dentists to inspect facilities where general anesthesia, deep sedation, parenteral conscious sedation, or pediatric conscious sedation is performed. Consultants shall receive instruction in inspection procedures from the Board prior to initiating an inspection.
- (2) Any dentist who has applied for or received a general anesthesia permit, parenteral conscious sedation permit, or pediatric conscious sedation permit shall be subject to announced or unannounced on-site inspection and evaluation by an inspection consultant. This inspection and evaluation shall be required prior to issuance of an anesthesia permit. However, if the Agency cannot complete the required inspection prior to licensure, such inspection shall be waived until such time that it can be completed following licensure.
 - (3) No change.
- (4) Any applicant who receives a failing grade as a result of the on-site inspection shall be denied a permit for general anesthesia and parenteral conscious sedation.
- (5) Any permit holder who fails the inspection shall be so notified by the anesthesia inspection consultant and shall be given a written statement at the time of inspection which specifies the deficiencies which resulted in a failing grade. The inspection consultant shall give the permit holder 20 days from the date of inspection to correct any documented deficiencies. Upon notification by the permit holder to the inspection consultant that the deficiencies have been corrected, the inspector shall reinspect to insure that the deficiencies have been corrected. If the deficiencies have been corrected, a passing grade shall be assigned. No permit holder who has received a failing grade shall be permitted 20 days to correct deficiencies unless he voluntarily agrees in writing that no general anesthesia or deep sedation or parenteral conscious sedation will be performed until such deficiencies have been corrected and such corrections are verified by the anesthesia inspection consultant and a passing grade has been assigned.
 - (6) through (7) No change.
- (8) The holder of any general anesthesia, parenteral conscious sedation, or pediatric conscious sedation permit shall inform the Board office in writing of any change in authorized

locations for the use of such permits prior to accomplishing such changes. Written notice shall be required prior to the addition of any location or the closure of any previously identified location.

(9) No change.

Specific Authority 466.017(3) FS. Law Implemented 120.60(8), 466.017(3) FS. History–New 10-24-88, Amended 3-27-90, 11-8-90, 4-24-91, 2-1-93, Formerly 21G-14.007, Amended 12-20-93, Formerly 61F5-14.007, Amended 8-8-96, Formerly 59Q-14.007, Amended

64B5-14.009 Parenteral Conscious Sedation.

Parenteral Conscious Sedation Permit applicants or permit holders shall comply with the following requirements at each location where anesthesia procedures are performed. The requirements shall be met and equipment permanently maintained and available at each location.

- (1) through (6) No change.
- (7) The following records are required when parenteral conscious sedation is administered:
 - (a) through (d) No change.
 - 1. through 6. No change.

Specific Authority 466.004, 466.017 FS. Law Implemented 466.017 FS. History–New 10-24-88, Amended 11-16-89, 4-24-91, Formerly 21G-14.009, 61F5-14.009, Amended 8-8-96, 10-1-96, Formerly 59Q-14.009, Amended 8-2-00,______.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Dentistry

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 4, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: April 19, 2002

DEPARTMENT OF HEALTH

Board of Dentistry

RULE TITLE:

RULE NO.:

Standards for the Use of Controlled

Substances for Treatment of Pain 64B5-17.0045 PURPOSE AND EFFECT: The Board proposes to promulgate

a new rule which will address the standards for the use of controlled substances for the treatment of pain.

SUMMARY: This rule sets the standards for the use of controlled substances in an effort to protect the public health and safety from misuse. The rule requires appropriate documentation of the patient's records in justification of prescribing any controlled substances.

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: 466.004 FS.

LAW IMPLEMENTED: 466.017, 466.028(1)(p) FS.

IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAW. (IF NOT REQUESTED IN WRITING, A HEARING WILL NOT BE HELD)

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Sue Foster, Executive Director, Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3254

THE FULL TEXT OF THE PROPOSED RULE IS:

64B5-17.0045 Standards for the Use of Controlled Substances for Treatment of Pain.

- (1) The Board of Dentistry recognizes that principles of quality medical practice dictate that the people of the State of Florida have access to appropriate and effective pain relief. All dentists should become knowledgeable about effective methods of pain treatment as well as statutory requirements for prescribing controlled substances.
- (2) The Board recognizes that controlled substances, including opioid analgesics, may be essential in the treatment of acute pain due to a dental procedure.
- (3) The Board of Dentistry is obligated under the laws of the State of Florida to protect the public health and safety. The Board recognizes that inappropriate prescribing of controlled substances, including opioid analgesics, may lead to drug diversion and abuse by individuals who seek them for other than legitimate medical use.
- (4) Dentists should be diligent in preventing the diversion of drugs for illegitimate purposes. This includes keeping prescription blanks in a safe place; not signing prescription blanks in advance; writing out the actual amount prescribed in addition to using a number to discourage alterations; and assisting pharmacists who may telephone to verify information about a prescription order.
- (5) The Board will consider prescribing, ordering, administering, or dispensing controlled substances for pain to be for a legitimate medical purpose if based on sound clinical grounds. The dental procedure or justification for such prescribing must be clearly documented in the patient's record. All such prescribing must be in compliance with applicable state and federal law.

Specific Authority 466.004 FS. Law Implemented 466.017, 466.028(1)(p) FS. History–New .

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Dentistry

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 4, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 30, 2001

DEPARTMENT OF HEALTH

Council of Licensed Midwifery

RULE TITLES: RULE NOS.:

Meetings; Notice of Meetings, Agenda

and Quorum 64B24-1.004
Public Information and Inspection of Records 64B24-1.005
PURPOSE AND EFFECT: The Department of Health is proposing the repeal of rules deemed unnecessary.

SUMMARY: Rules 64B24-1.004 and 1.005, F.A.C., are repealed as unnecessary.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: A statement of estimated regulatory cost has not been prepared regarding these proposed rules.

Any person who wishes to provide information regarding a 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: 456.004(5) FS.

LAW IMPLEMENTED: 456.011(3), 467.004 FS.

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

All written material received by the Department within 21 days of the date of publication of this notice shall be made a part of the official record.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida, 32399-3256

THE FULL TEXT OF THE PROPOSED RULES IS:

64B24-1.004 Meetings; Notice of Meetings, Agenda and Ouorum.

Specific Authority 456.004(5) FS. Law Implemented 456.011(3), 467.004 FS. History-New 1-26-94, Formerly 61E8-1.004, 59DD-1.004, Repealed

64B24-1.005 Public Information and Inspection of Records.

Specific Authority 456.004(5) FS. Law Implemented 119.07 FS. History–New 1-26-94, Formerly 61E8-1.005, 59DD-1.005, Repealed_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Amy Jones, Division Director, Department of Health, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C00, Tallahassee, Florida 32399-3250

DATE PROPOSED RULE APPROVED BY AGENCY HEAD May 8, 2002

DEPARTMENT OF HEALTH

Council of Licensed Midwifery

| RULE TITLES: | RULE NOS.: |
|---------------------------------|-------------|
| Licensure to Practice Midwifery | 64B24-2.001 |
| Examination | 64B24-2.002 |
| Licensure by Examination | 64B24-2.003 |
| Licensure by Endorsement | 64B24-2.004 |

PURPOSE AND EFFECT: The Department of Health is proposing amendments to rules regulating the profession of licensed midwifery, in order to provide clarification regarding the requirements to obtain such a license.

SUMMARY: Amendments are proposed for 64B24-2.001, F.A.C, to provide for the revised application form and the proper address for receipt of such, to include the statutorily required courses in domestic violence and medical errors as a condition of initial licensure, and to add clarifying language. Rule 64B24-2.002, F.A.C., is amended to clarify the appropriate national examination for licensure as a midwife in the State of Florida, and to delete unnecessary language. Amendments proposing clarifying language are provided as well for Rules 64B24-2.003, and 64B24-2.004, F.A.C. Finally, a mandatory statutory requirement is also included in Rule 64B24-2.004, F.A.C., to enumerate all information necessary for application for licensure by endorsement.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: A statement of estimated regulatory cost has not been prepared regarding these proposed rules.

Any person who wishes to provide information regarding a 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: 456.004(5), 467.005, 456.017 FS. LAW IMPLEMENTED: 456.013, 456.031, 467.011, 456.017, 467.0125 FS.

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

All written material received by the Department within 21 days of the date of publication of this notice shall be made a part of the official record

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULES IS:

64B24-2.001 Licensure to Practice Midwifery.

(1) Persons desiring to be licensed as a midwife shall make application to the department and remit all applicable fees as required by Chapter 64B24-3, F.A.C. The application shall be made on Form DH-MQA 1051 MW-001, Application for Midwifery Licensure, incorporated herein by reference and

revised 3/02 effective 1-26-94, which and can be obtained from the Council of Licensed Midwifery, Department of Health, 4052 Bald Cypress Way, Bin C06 Northwood Centre, 1940 North Monroe Street, Tallahassee, Florida 32399-3256 32399-2204. If incomplete, the The application and fees shall expire 1 year from the date on which the application is initially received by the department. After a period of 1 year a new application with required fees must be submitted.

- (2) The department shall license only those applicants who have completed the application form, remitted the <u>appropriate</u> fees required initial licensure fee established by Rule Chapter 64B24-3 64B24-3.003, F.A.C., and who demonstrate to the department that they:
 - (a) Are 21 years of age or older;
- (b) Meet the requirements for licensure by exam pursuant to Rule 64B24-2.003, F.A.C., or licensure by endorsement pursuant to Rule 64B24-2.004, F.A.C. Graduated from an approved midwifery program pursuant to Rule 64B24-4.002, F.A.C., or meet the requirements pursuant to Rule 64B24-2.004, F.A.C.; and
- (c) <u>Have completed a one (1) hour educational course on domestic violence that meets the substantive specifications set forth in Section 456.031, F.S., as it pertains to the practice of midwifery; and Passed the licensure examination pursuant to Rule 64B24-2.002, F.A.C.</u>
- (d) Have completed a two (2) hour course relating to the prevention of medical errors.
 - (3) No change.

Specific Authority 456.004(5), 467.005 FS. Law Implemented 456.013, 456.031 456.031 456.017, 467.011, 467.0125 FS. History–New 1-26-94, Formerly 61E8-2.001, 59DD-2.001, Amended

64B24-2.002 Examination.

- (1) The department hereby designates the North American Registry of Examination for Midwives Midwives' (NARM) written examination dated after October 1, 1993, as the midwifery licensure examination. Any person desiring to be licensed as a midwife shall apply to the NARM department to take the licensure examination, remit the fees pursuant to Rule 64B24-3.002, F.A.C., and evidence eligibility to sit for the examination pursuant to Rule 64B24-2.003, F.A.C. The application and fees and all supporting documentation to determine eligibility shall be submitted to the department 60 days prior to the examination date.
- (2) An applicant who has completed all requirements for the examination and has been certified eligible by the department will be admitted to the next available examination for licensure.
- (3) The department shall conduct examinations for licensure in such geographical locations as established by the department. The department shall notify the applicants of the location of the examination by U.S. Mail.

(4) An applicant who fails to receive a passing score, established by the North American Registry of Midwives, shall apply to the department for re-examination, remit fees pursuant to Rule 64B24-3.001, F.A.C., and documentation pursuant to Rule 64B24-2.003, F.A.C.

Specific Authority <u>456.004</u> <u>467.011</u>, 467.005, 456.017 FS. Law Implemented 467.011, 456.017 FS. History–New 1-26-94, Formerly 61E8-2.002, Amended 9-3-95, Formerly 59DD-2.002, <u>Amended</u>

64B24-2.003 Licensure by Examination.

Persons desiring to obtain licensure as a midwife by examination shall make application to the department pursuant to Rule 64B24-2.001(1), F.A.C., and shall evidence compliance of licensure requirements by submitting the following:

- (1) The initial licensure fee pursuant to Rule 64B24-3.001, F.A.C.:
- (1)(2) An official transcript from an approved Florida midwifery training program specifically setting forth all courses successfully completed, the date of the applicant's graduation and the degree, certificate, or diploma awarded;
- (2)(3) A written plan for the management of emergencies which meets the requirements of Section 467.017(1), F.S. described in Rule 64B24-7.012, F.A.C.; and
- (3)(4) Documentation of a passing score on the licensure examination <u>designated in pursuant to Rule 64B24-2.002</u>, F.A.C. Such documentation shall be sent directly from the NARM <u>testing department</u>.

Specific Authority 456.004(5), 467.005 FS. Law Implemented 456.017, 467.011 FS. History–New 1-26-94, Formerly 61E8-2.003, 59DD-2.003, Amended

64B24-2.004 Licensure by Endorsement.

- (1)(a) Foreign trained applicants for licensure by endorsement shall make application to the department pursuant to Rule 64B24-2.001(1), F.A.C., and shall in addition submit to the department:
- <u>1.(a)</u> A valid certificate or diploma from either a foreign institution of medicine or a foreign school of midwifery;
- 2.(b) A certified translation of the certificate or diploma earned from a foreign institution of medicine or foreign school of midwifery;
- 3.(e) The document which renders the foreign trained applicant eligible to practice medicine or midwifery in the country in which that document was issued;
- 4.(d) A certified translation of the certificate, diploma or license which renders the foreign trained applicant eligible to practice medicine or midwifery in the country from which the diploma or certificate was awarded;
- <u>5.(e)</u> Clarification of the existence of any deviation as to how the applicant's name appears on the face of documents in support of this application;
- <u>6.(f)</u> Evidence of successful completion of the 4 month prelicensure course pursuant to Rule 64B24-4.010, F.A.C.; and

- 7.(g) Evidence of a passing score on the licensure examination; and
- 8. A written plan for the management of emergencies which meets the requirements described in section 467.017, F.S.
- (b)(2) In determining whether the requirements to hold a certificate or diploma from a foreign institution of medicine or a foreign school of midwifery are substantially equivalent to the requirements established under Chapter 467, Florida Statutes, and these rules, the department shall consider whether:
- <u>1.(a)</u> The institutions which awarded the diploma or certificate are listed with the *World Directory of Medical Schools* of the World Health Organization;
- 2.(b) The curriculum of the foreign institution of medicine or foreign school of midwifery provided both classroom instruction and core rotations in obstetrics/gynecology for award of the diploma or certificate;
- 3.(c) The medical education required for award of the diploma or certificate was at least 3 years; and
- 4.(d) The applicant's diploma or certificate meets, as published in the *World Directory of Medical Schools* of the World Health Organization, the requirements to render the applicant eligible to practice medicine or midwifery in the country from which the diploma or certificate was awarded.
- (2)(a)(3) Persons trained in Applicants from another state for licensure by endorsement shall make application to the department pursuant to Rule 64B24-2.001(1), F.A.C., and shall in addition submit to the department:
- $\underline{1.(a)}$ A current valid unrestricted certificate or license to practice midwifery in another state;
- 2.(b) Evidence of successful completion of the 4 month prelicensure course pursuant to Rule 64B24-4.010, F.A.C.; and
- 3.(e) Evidence of a passing score on the licensure examination; and
- 4. A written plan for the management of emergencies which meets the requirements described in Section 467.017, F.S.
- (b)(4) In determining whether the requirements to hold a certificate or license to practice midwifery in another state are substantially equivalent to the requirements established under Chapter 467, Florida Statutes, and these rules, the applicant shall submit:
- 1.(a) A certificate or diploma awarded by a midwifery program which was approved by the certifying body of the state in which it was located, or an authenticated copy of that certificate or diploma;
- $\underline{2.(b)}$ A copy of the other state's laws and rules under which the applicant's certificate or license was issued; and

<u>3.(e)</u> Official transcripts from the midwifery program which document classroom instruction and clinical training equivalent to the requirements in Rule 64B24-4.004, F.A.C., through Rule 64B24-4.007, F.A.C.

(3)(a)(5) The department shall issue a temporary certificate to practice midwifery in areas of critical need to any applicant who is qualifying for licensure by endorsement pursuant to Rule 64B24-2.004 (1)(2) or (2)(3), F.A.C. The applicant shall submit to the department:

<u>1.(a)</u> A completed application and the temporary certificate fee required pursuant to Rule 64B24-3.004, F.A.C.;

2.(b) Documentation as required by subparagraphs (1)(a) or (2)(a) of this rule pursuant to Rule 64B24-2.004(2)(a) (c) or Rule 64B24-2.004(3)(a)-(c), F.A.C., which will evidence the active pursuit of licensure through endorsement;

3.(e) Documentation of the area of critical need pursuant to Section 467.0125(2)(a), Florida Statutes; and

4.(d) Name of the individual who will serve as the midwife's supervisor. This individual shall be a physician currently licensed pursuant to Chapter 458 or Chapter 459, a certified nurse midwife licensed pursuant to Chapter 464, or a midwife licensed pursuant to Chapter 467, who has a minimum of 3 years of professional experience.

(b)(6) A temporary certificate issued under this section shall be valid only as long as an area for which it is issued remains an area of critical need, but no longer than 2 years. A temporary certificate is not renewable.

(c)(7) To ascertain that the minimum requirements of the midwifery rules are being met, temporary certificate holders shall submit by December 1 each year Form DH-MQA 1052 MW-002, Annual Report of Midwifery Practice, incorporated herein by reference and revised effective 8/01 1-26-94, and can be obtained from the Council of Licensed Midwifery, Department of Health, 4052 Bald Cypress Way, Bin C02 Northwood Centre, 1940 North Monroe Street, Tallahassee, Florida 32399-3256 32399-2204.

Specific Authority 467.005 456.004(5) FS. Law Implemented 467.0125 FS. History-New 1-26-94, Formerly 61E8-2.004, 59DD-2.004, Amended

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Amy Jones, Division Director, Department of Health, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C00, Tallahassee, Florida 32399-3250

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 8, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 24, 2002

DEPARTMENT OF HEALTH

Council of Licensed Midwifery

RULE TITLE: Change of Status Fee RULE NO.: 64B24-3.015

PURPOSE AND EFFECT: The Department of Health is proposing amendment to the fee rule establishing the cost associated with a change of licensure status for the profession of licensed midwifery to make it correspond with statutory requirements.

SUMMARY: Amendment is proposed to Rule 64B24-3.015, F.A.C., to conform to the statutory allowances of Section 456.036, F.S.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: A Statement of Estimated Regulatory cost has not been prepared regarding these proposed rules.

Any person who wishes to provide information regarding a 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: 456.036 FS.

LAW IMPLEMENTED: 456.036 FS.

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

All written material received by the Department within 21 days of the date of publication of this notice shall be made a part of the official record.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

64B24-3.015 Change of Status Fee.

The fee for processing a licensee's request to change licensure status at any time other than at the beginning of a licensure eyele shall be \$75.

Specific Authority 456.036 FS. Law Implemented 456.036 FS. History–New 8-15-95, Formerly 59DD-3.015, Amended

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Amy Jones, Division Director, Department of Health, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C00, Tallahassee, Florida 32399-3250

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 8, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 24, 2002

DEPARTMENT OF HEALTH

Council of Licensed Midwifery

RULE TITLES: RULE NOS.: Curriculum Guidelines 64B24-4.006 Clinical Training 64B24-4.007

PURPOSE AND EFFECT: The Department of Health is proposing amendments to rules governing the curriculum guidelines and clinical training requirements for persons seeking licensure as a midwife in the State of Florida.

SUMMARY: Amendments are proposed to Rule 64B24-4.006, F.A.C., to include a reference to "neonatal care," which was inadvertently omitted from an earlier rulemaking, and to provide an updated address. Amendments are also proposed to Rule 64B24-4.007, F.A.C., to provide clarification regarding the meaning of the "intrapartum period," and to establish the necessary number of neonatal examinations required for clinical training.

SUMMARY OF **STATEMENT** OF **ESTIMATED** REGULATORY COST: A statement of estimated regulatory cost has not been prepared regarding these proposed rules.

Any person who wishes to provide information regarding a 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: 467.005, 467.205(2) FS.

LAW IMPLEMENTED: 467.205 FS.

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

All written material received by the Department within 21 days of the date of publication of this notice shall be made a part of the official record.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULES IS:

64B24-4.006 Curriculum Guidelines.

- (1) No change.
- (2) Standards for midwifery programs shall encompass classroom instruction and clinical training in all aspects of antepartal, intrapartal, and postpartal, and neonatal care and shall include:
- (a) The core competencies established by the American College of Nurse Midwives and the Midwives Alliance of North America incorporated herein by reference and effective 1-26-94, and can be obtained upon request from the Council of Licensed Midwifery, Department of Health, 4052 Bald

Cypress Way, Bin C06 Northwood Centre, 1940 North Monroe Street, Tallahassee, Florida 32399-3256 32399-2204; and

(b) No change.

Specific Authority 467.005 456.004(5), 467.205(2) FS. Law Implemented 467.205 FS. History-New 1-26-94, Formerly 61E8-4.006, 59DD-4.006,

64B24-4.007 Clinical Training.

- (1) through (4) No change.
- (5) The student midwife, during training, shall undertake, under the supervision of a preceptor, the care of 50 women in each of the antepartal, intrapartal and postpartal periods, but the same women need not be seen through all 3 periods. The intrapartum period includes labor, birth, and the immediate postpartum. No more than five percent (5%) of the required intrapartal managements shall include transfers in active labor.
- (6) During training under the supervision of a preceptor, the student midwife shall undertake the neonatal examination of 50 newborns.

(7)(6) The student midwife shall observe an additional 25 women in the intrapartal period.

(8)(7) Each student midwife shall have a designated program faculty member available for periodic consultation during preceptorship.

Specific Authority 467.005 456.004(5), 467.205(2) FS. Law Implemented 467.205 FS. History–New 1-26-94, Formerly 61E8-4.007, 59DD-4.007.

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Amy Jones, Division Director, Department of Health, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C00, Tallahassee, Florida 32399-3250

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 8, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 24, 2002

DEPARTMENT OF HEALTH

Council of Licensed Midwifery

RULE TITLES: **RULE NOS.:** Renewal of Midwifery License 64B24-5.001 **Inactive Status** 64B24-5.002 Reactivation of Inactive License 64B24-5.003

PURPOSE AND EFFECT: The Department of Health is proposing amendments to rules regulating the profession of licensed midwifery to update provisions regarding licensure renewal and inactive status.

SUMMARY: Rule 64B24-5.001, F.A.C., is amended to clarify the necessary requirements for licensure renewal. Repeal is sought for Rule 64B24-5.002, F.A.C., regarding inactive status as the rule no longer reflects the statutory requirements for inactive status licensees. Finally, language is added to Rule 64B24-5.003, F.A.C., to clarify the process of reactivation of a license.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: A statement of estimated regulatory cost has not been prepared regarding these proposed rules.

Any person who wishes to provide information regarding a 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: 456.004(5), 467.005 FS. LAW IMPLEMENTED: 456.004(1), 467.013(3) FS.

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

All written material received by the Department within 21 days of the date of publication of this notice shall be made a part of the official record.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULES IS:

64B24-5.001 Renewal of Midwifery License.

The department shall renew an active license to practice midwifery upon timely receipt of:

- (1) Licenses shall be renewed biennially on or before December 31 of each odd-numbered year.
- (2) The application for renewal shall be made on BPR form 01, License Data/Renewal Notice, incorporated herein by reference and effective 1-26-94, prepared and mailed by the department to each licensed midwife 60 days prior to the end of the biennium.
- (3) The department shall renew only those licenses of midwives who:
- (a) Return The form affirming compliance with all requirements of renewal;
- (2)(b) Remit The appropriate fees required renewal fee pursuant to Rule Chapter 64B24-3 64B24-3.001, F.A.C.; and
- (3)(c) Submit A written plan for the management of emergencies current emergency backup and plan for patient care pursuant to Section 467.017, F.S. Rule 64B24-7.012, F.A.C.; and
- (d) Evidence 20 hours of continuing education pursuant to Rule 64B24-6.001, F.A.C.

(4) Any license which is not renewed by the end of the biennium established by the department shall automatically revert to involuntary inactive status unless the licensee has applied for voluntary inactive status pursuant to Rule 64B24-5.002, F.A.C. Such license may be reactivated only if the licensee meets the requirements for reactivation pursuant to Rule 64B24-5.003, F.A.C.

Specific Authority 456.004(5) FS. Law Implemented 456.004(1), 467.013(3) FS. History–New 1-26-94, Formerly 61E8-5.001, 59DD-5.001, Amended

64B24-5.002 Inactive Status.

Specific Authority 456.004(5) FS. Law Implemented 456.004(1), 467.013 FS. History–New 1-26-94, Formerly 61E8-5.002, 59DD-5.002, Repealed

64B24-5.003 Reactivation of Inactive License.

- (1) Any person desiring to reactivate an inactive license shall <u>contact apply to</u> the department <u>in writing to request such from the department pursuant to Rule 64B24-2.001, F.A.C.</u>
- (2) The department shall reactivate the license of applicants who pay the active status renewal fee, the reactivation fee, the change of status fee, and if applicable, the delinquency fee, as required by Chapter 64B24-3, F.A.C., have completed the reactivation application, remitted the inactive status fee required by Rule 64B24-3.001, F.A.C., if said fee has not been previously paid, the biennial renewal fee required by Rule 64B24-3.001, F.A.C., and who have met the continuing education requirement established in pursuant to Rule 64B24-6.002, F.A.C.

Specific Authority <u>467.005</u>, 456.004(5) FS. Law Implemented 456.004(1), 467.013 FS. History–New 1-26-94, Formerly 61E8-5.003, 59DD-5.003, Amended

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Amy Jones, Division Director, Department of Health, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C00, Tallahassee, Florida 32399-3250

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 8, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 24, 2002

DEPARTMENT OF HEALTH

Council of Licensed Midwifery

| edulien of Electisca Milawnery | |
|--|-------------|
| RULE TITLES: | RULE NOS.: |
| Continuing Education for Biennial Renewal | 64B24-6.001 |
| Continuing Education Requirements | |
| for Reactivation | 64B24-6.002 |
| Continuing Education Providers | 64B24-6.004 |
| Criteria for Continuing Education Programs | 64B24-6.005 |

PURPOSE AND EFFECT: The Department of Health is proposing amendments to rules regulating continuing education requirements for the profession of licensed midwifery.

SUMMARY: Subsection (3) of Rule 64B24-6.001, F.A.C., is moved to Rule 64B24-6.005, F.A.C., while the remainder of the rule is reformatted and the statutorily required continuing education course on medical error prevention is added to the rule's requirements. Clarifying language is proposed for Rule 64B24-6.002, F.A.C. Rule 64B24-6.004, F.A.C., is amended to revise a form and provide an updated address for receipt of such, and to increase the number of years during which a continuing education provider must maintain records for each program offered, from three to four years. Finally, grammatical changes are proposed for Rule 64B24-6.005, F.A.C., language is moved to this rule from Rule 64B24-6.001, F.A.C., and a limitation on the number of hours for videocasette courses is clarified to reflect the statutory allowance.

SUMMARY OF STATEMENT OF **ESTIMATED** REGULATORY COST: A statement of estimated regulatory cost has not been prepared regarding these proposed rules.

Any person who wishes to provide information regarding a 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: 456.004, 467.005, 456.031, 467.012 FS.

LAW IMPLEMENTED: 381.0034, 456.013, 456.031, 467.012

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

All written material received by the Department within 21 days of the date of publication of this notice shall be made a part of the official record.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULES IS:

64B24-6.001 Continuing Education for Biennial Renewal.

(1) Each midwife licensed pursuant to Chapter 467, F.S., shall be required to complete 20 clock hours of department approved, clinically related continuing education during the biennium preceding renewal as established by the department pursuant to Sections 445.203(1) and 467.012(2), F.S., and Rule 64B24-6.005, F.A.C. At least 1 hour of the 20 shall be required in HIV/AIDS and 1 hour shall be taken in the laws and rules governing the Midwifery Practice Act. An additional 1 hour of continuing education must be taken for biennial renewal in domestic violence. A clock hour is defined as not less than 50 minutes.

- (2) A licensee shall not be required to complete continuing education hours, if the initial license is issued in the second year of the biennium.
- (3) The following courses are required as part of each licensees' biennial continuing education requirements:
 - (a) One (1) hour in HIV/AIDS;
 - (b) One (1) hour in domestic violence;
- (c) One (1) hour in the laws and rules governing the Midwifery Practice Act; and
 - (d) Two (2) hours in medical error prevention.
- (3) To receive approval by the department, courses on domestic violence must be a minimum of 1 hour long, cover the substantive areas set forth in Section 456.031, F.S., as it pertains to the practice of midwifery, and must be approved by a state or federal government agency or professional association within the United States or offered by an approved continuing education provider. Home study courses which meet these requirements will be accepted.

Specific Authority 456.004(1), 456.031, 467.005 FS. Law Implemented 381.0034, 456.013, 456.031, 467.012(2) FS. History-New 1-26-94, Formerly 61E8-6.001, Amended 6-20-96, Formerly 59DD-6.001, Amended

64B24-6.002 Continuing Education Requirements for Reactivation.

- (1) No change.
- (2) The licensee shall submit to the department evidence of participation in 10 clock hours of department approved, clinically related continuing education for each year the licensee's license remained inactive pursuant to Rule 64B24-6.005, F.A.C. This requirement is in addition to submitting evidence of the continuing education required for the previous biennium in which the licensee held an active license.

Specific Authority 467.005 456.004(5) FS. Law Implemented 467.013 FS. History-New 1-26-94, Formerly 61E8-6.002, 59DD-6.002, Amended

64B24-6.004 Continuing Education Providers.

- (1) Any institution, organization, agency or individual seeking approved provider status for the purpose of conducting continuing education programs for licensed midwives shall apply to the department, by completing and complete Form DH-MQA 1055 MWCE-001, Application for Provider of Continuing Education Provider for Midwives, incorporated herein by reference and revised effective 8/01 1-26-94, which and may be obtained from the Council of Licensed Midwifery, Department of Health, 4052 Bald Cypress Way, Bin C06 Care Administration, Northwood Centre, 1940 North Monroe Street, Tallahassee, Florida 32399-3256 32399-2204; and remitting remit the provider application fee required by pursuant to Rule Chapter 64B24-3 64B24-3.001, F.A.C.
 - (2) through (3) No change.

- (4) Approved providers shall maintain records of each program offering for 4 3 years following each licensure biennium during which the program was offered. Program records shall be limited to the following items:
 - (a) through (f) No change.
 - (5) through (7) No change.

Specific Authority <u>467.005</u> <u>456.004(5)</u> FS. Law Implemented <u>467.012</u> <u>456.004(4)</u> FS. History–New 1-26-94, Formerly 61E8-6.004, 59DD-6.004, <u>Amended</u>

64B24-6.005 Criteria for Continuing Education Programs.

- (1) Any institution, organization, agency or individual approved by the department to provide continuing education programs to midwives for the purpose of licensure renewal shall demonstrate such programs comply with the following criteria:
 - (a) through (c) No change.
- (d) Presenters, instructors and facilitators of programs shall be recognized professionals such as physicians, nurses, certified nurse <u>midwives</u> <u>midwifes</u>, psychologists, or licensed <u>midwives</u> <u>midwifes</u>.
- (2) The following programs which meet the requirements of subsection (1) of this rule are approved for renewal of license:
 - (a) through (k) No change.
- (l) <u>Videocassette</u> <u>Self-study</u> courses up to a maximum of five (5) hours per <u>subject</u> <u>biennium</u> which meet the criteria pursuant to this section.
 - (m) No change.
- (3) To receive approval by the department, courses on domestic violence must be a minimum of 1 hour long, cover the substantive areas set forth in Section 456.031, F.S., as it pertains to the practice of midwifery, and must be approved by a state or federal government agency or professional association within the United States or offered by an approved continuing education provider. Home study courses which meet these requirements will be accepted.

Specific Authority 467.005, 467.012 FS. Law Implemented <u>456.031, 456.013</u> <u>456.025(4)</u>, 467.012 FS. History–New 1-26-94, Formerly 61E8-6.005, Amended 3-20-96, Formerly 59DD-6.005, Amended _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Amy Jones, Division Director, Department of Health, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C00, Tallahassee, Florida 32399-3250

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 8, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 24, 2002

DEPARTMENT OF HEALTH

Certified Nurse-Midwives

Council of Licensed Midwifery RULE TITLES: RULE NOS.: Definitions 64B24-7.001 Qualifications Necessary for Practice 64B24-7.002 Risk Assessment 64B24-7.004 Informed Consent 64B24-7.005 Preparation for Home Delivery 64B24-7.006 Responsibilities of Midwives During the Antepartum Period 64B24-7.007 Responsibilities of Midwives During 64B24-7.008 Intrapartum Responsibilities of the Midwife **During Postpartum** 64B24-7.009 Collaborative Management 64B24-7.010 Administration of Medicinal Drugs 64B24-7.011 Emergency Care Plan 64B24-7.012 Requirement for Insurance 64B24-7.013 Patient Records 64B24-7.014 Exemption for Registered Nurses and

PURPOSE AND EFFECT: The Department of Health is proposing amendments to rules regulating the responsibilities of licensed midwives during the course of their professional duties. Additionally, repeal is proposed for certain rules that have been determined to be unnecessary.

64B24-7.017

SUMMARY: Rule 64B24-7.001, F.A.C. is amended to correctly indicate that the definitions provided are for the entire rule chapter. Rule 64B24-7.002, F.A.C. is repealed as unnecessary. Rule 64B24-7.004, F.A.C. is amended to further define a midwife's role in performing a risk assessment of their patients. Rule 64B24-7.005, F.A.C. is amended for greater clarity. Rule 64B24-7.006, F.A.C., is amended to further define a midwife's role in preparation for home delivery. Rule 64B24-7.007, F.A.C., is amended to further define a midwife's role during the antepartum period. Rule 64B24-7.008, is amended to further define a midwife's role during intrapartum. Rule 64B24-7.009, F.A.C., is amended to further define a midwife's role during postpartum. An updated address is provided as amendment to Rule 64B24-7.010, F.A.C., along with the necessary requirements for the written collaborative management protocol. Rule 64B24-7.011, F.A.C. is amended for clarification. Rule 64B24-7.012, F.A.C. is amended as it merely reiterates statutory requirements. Rule 64B24-7.013, F.A.C. is amended to clarify a statutory reference and to remove outdated language. Finally, Rule 64B24-7.014, F.A.C. is amended to specify the form used for a birth certificate and Rule 64B24-7.017, F.A.C. is repealed as it merely reiterates statutory requirements.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: A statement of estimated regulatory cost has not been prepared regarding these proposed rules.

Any person who wishes to provide information regarding a 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: 456.004, 467.005, 409.908(12) FS. LAW IMPLEMENTED: 467.014, 467.015, 467.016, 467.019, 409.908(12) FS.

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

All written material received by the Department within 21 days of the date of publication of this notice shall be made a part of the official record.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULES IS:

64B24-7.001 Definitions.

As used in this rule chapter section, the term:

(1) through (3) No change.

Specific Authority 467.005 456.004(5) FS. Law Implemented 467.005 FS. History-New 7-14-94, Formerly 61E8-7.001, 59DD-7.001, Amended

64B24-7.002 Qualifications Necessary for Practice.

Specific Authority 456.004(5) FS. Law Implemented 467.009, 467.011, 467.0125 FS. History-New 7-14-94, Formerly 61E8-7.002, 59DD-7.002, Repealed

64B24-7.004 Risk Assessment.

- (1) For each patient, the licensed midwife shall assess risk status criteria for acceptance and continuation of care. The general health status and risk assessment shall be determined by the licensed midwife by obtaining a detailed medical history, performing a physical examination, and taking into account family circumstances along with social and psychological factors. The licensed midwife shall risk screen potential patients using the criteria in this section. If the risk factor score reaches 3 points the midwife shall consult with a physician who has obstetrical hospital privileges and if there is a joint determination that the patient can be expected to have a normal pregnancy, labor and delivery the midwife may provide services to the patient.
 - (2) No change.
 - (3) The risk factors shall be scored as follows: Score
 - (a) Socio-Demographic Factors
 - 1. Chronological age under 16, or older than 40. 13

3

- 2. Residence of anticipated birth more than
- 30 minutes from emergency care.
 - (b) Documented Problems in Maternal Medical History
 - 1. through 3. No change.

- 4. Endocrine System
- a. Diabetes mellitus.

3

1

1

- b. History of gestational diabetes.
- c. Current thyroid Thyroid disease.
- (i) Euthyroid History of thyroid surgery
- (EU thyroid).
- (ii) Non-Euthyroid Current thyroid disease
- requiring medication other than replacement therapy. 3 (iii) Stable on thyroid replacement therapy. 1
 - 5. through 10. No change.

Specific Authority 456.004(5), 467.005 FS. Law Implemented 467.015 FS. History–New 7-14-94, Formerly 61E8-7.004, 59DD-7.004, Amended

64B24-7.005 Informed Consent.

- (1) No change.
- (2) To complete the consent form, the licensed midwife shall inform the patient of:
- (a) The licensee's His or Her qualifications to perform the services rendered.
 - (b) The nature and risks of the procedures to be used.
 - (c) The advantages of the procedures to be used.
- (d) Professional liability His or Her malpractice insurance status.
 - (3) No change.

Specific Authority 456.004(5), 467.005 FS. Law Implemented 467.014, 467.015(1)(a), 467.016 FS. History-New 7-14-94, Formerly 61E8-7.005, 59DD-7.005, Amended 5-31-01,

64B24-7.006 Preparation for Home Delivery.

- (1) For home births, the licensed midwife shall:
- (a) Encourage each patient to have medical care available by a health care practitioner experienced in obstetrics throughout the prenatal, intrapartal and postpartal periods, and
- (b) Make make a home visit by 36 weeks of pregnancy. The licensed midwife shall ensure that the setting in which the infant is to be delivered is safe, clean and conducive to the establishment and maintenance of health.
 - (2) through (4) No change.
- (5) The midwife shall have available a birth certificate form (HRS 511) for recording each birth. Such form is available from the local health care unit.

Specific Authority 467.005 456.004(5) FS. Law Implemented 467.015 467.019(1) FS. History-New 7-14-94, Formerly 61E8-7.006, 59DD-7.006, Amended

64B24-7.007 Responsibilities of Midwives During the Antepartum Period.

- (1) The licensed midwife shall:
- (a) Encourage each patient accepted for care to have medical care available by a health care provider experienced in obstetrics throughout the prenatal, intrapartal and postpartal period.

- (a)(b) Require each patient to have a complete history and physical examination which includes:
 - 1. through 2. No change.
 - 3. Gonorrhea and chlamydia screening culture.
 - 4. through 9. No change.
- (b)(c) Conduct the Healthy Start Prenatal Screen interview or assure that each patient has been previously screened.
- (c)(d) Provide counseling and offer screening related to the following:
 - 1. through 2. No change.
 - 3. Group B Streptococcus.
- 4.3. CVS or genetic amniocentesis for women 35 years of age or older at the time of delivery.
 - 5.4. Nutritional counseling.
 - 6.5. Childbirth preparation.
 - 7.6. Risk Factors.
 - <u>8.7.</u> Common discomforts of pregnancy.
 - 9.8. Danger signs of pregnancy.
 - (d)(e) Follow-up screening:
 - 1. through 3. No change.
- (e)(f) Require prenatal visits every four weeks until 28 weeks gestation, every two weeks from 28 to 36 weeks gestation and weekly from 36 weeks until delivery.
 - (2) through (4) No change.
- (5) The midwife shall refer a patient for consultation to a physician with hospital obstetrical privileges if any of the following conditions occur during the pregnancy:
 - (a) through (g) No change.
- (h) <u>Hyperemesis not responsive to supportive care</u> Any other severe obstetrical, medical or surgical problem.
- (i) Any other severe obstetrical, medical or surgical problem Severe Hyperemesis.
 - (6) through (7) No change.

Specific Authority 456.004(5), 467.005 FS. Law Implemented 467.015 FS. History-New 7-14-94, Formerly 61E8-7.007, 59DD-7.007, Amended

- 64B24-7.008 Responsibilities of Midwives During Intrapartum.
 - (1) No change.
 - (2) Throughout active labor the midwife shall:
 - (a) through (f) No change.
- (g) Estimate fluid intake and urinary output and test for ketones at least every 2 hours.
 - (h) Assess Observe for hydration and edema.
 - (3) No change.
- (4) Risk factors shall be assessed throughout labor to determine the need for physician consultation or emergency transport. The midwife shall consult, refer or transfer to a physician with hospital obstetrical privileges if the following occur during labor, delivery or immediately thereafter:
 - (a) through (m) No change.

- (n) <u>Active infectious process</u> Other medical or surgical problems.
- (o) Other medical or surgical problems Active infectious process.
 - (5) through (8) No change.

Specific Authority 467.005 456.004(5) FS. Law Implemented 467.015 FS. History–New 7-14-94, Formerly 61E8-7.008, 59DD-7.008, Amended

64B24-7.009 Responsibilities of the Midwife During Postpartum.

- (1) through (6) No change.
- (7) If the mother is Rh negative, the The midwife shall obtain the laboratory tests results of the cord blood studies, and if the infant is Rh positive, assure and document that the mother receives a positive result is indicated, assure that the mother will receive Rho immune globulin within 72 hours of the delivery.
 - (8) No change.
- (9) The midwife shall complete and mail the birth certificate for each birth to the registrar of vital statistics within 5 days following birth. A copy of such certificate shall be placed in the patient's record. Certificates of Live Birth (HRS 511) are available from the local county health unit. The midwife shall conduct the Healthy Start Postnatal Screening for the infant or assure that it will be done.
- (10) Within 5 days following each birth, form DH 511, Certificate of Live Birth, available from the local county health department, must be completed and submitted to the local registrar of vital statistics.
- (a) For births occurring in a hospital, birth center or other health care facility, or en route thereto, the person in charge of the facility is responsible for the preparation and filing of the certificate, and for certifying the facts of the birth therein. Within 48 hours of the birth, the midwife shall provide the facility with the medical information required for the birth certificate.
- (b) For births occurring outside a facility wherein a licensed midwife is in attendance during or immediately after the delivery, the midwife shall prepare and file the certificate. Each maternal death, newborn death, and stillbirth shall be reported immediately to the medical examiner and within 5 days to the department.

Specific Authority 467.005 467.015(7)(b) FS. Law Implemented 382.013, 467.015 FS. History—New 7-14-94, Formerly 61E8-7.009, Amended 3-20-96, Formerly 59DD-7.009, Amended

64B24-7.010 Collaborative Management.

- (1) No change.
- (2) Prior to engaging in collaborative management, the licensed midwife shall:
- (a) Provide and document to the <u>department</u> agency that the midwife successfully completed a course on collaborative management within an approved training program.

- (b) Enter into a written protocol with a physician licensed under Chapter 458 or Chapter 459, Florida Statutes, who is actively practicing obstetrics and has hospital obstetrical privileges. The protocol shall be made on the Collaborative Management Agreement form which is incorporated by reference herein, effective 7-14-94, and can be obtained from the Council of Licensed Midwifery, Department of Health, 4052 Bald Cypress Way, Bin C06 Northwood Centre, 1940 North Monroe Street, Tallahassee, Florida 32399-3256, 32399-2204 and shall at a minimum contain, but not be limited to, the following.
 - 1. through 7. No change.
- (c)8. The protocol shall be signed and dated by the patient, licensed midwife and physician. A copy of the collaborative agreement shall be placed and maintained in the patient's record.
- (d)(e) The midwife shall provide the physician with a complete copy of all patient records pertaining to this pregnancy.
- (3) A licensed midwife practicing within a health care facility or under the supervision of a physician group shall establish a written collaborative management protocol prior to providing prenatal and postnatal care to women not expected to have a normal pregnancy, labor, or delivery. The written protocol shall:
- (a) Be maintained on the premises of the health care facility,
 - (b) Be updated at least annually,
 - (c) Be readily accessible to the midwife and physician,
- (d) Include a plan for access to complete obstetrical services, and
- (e) Be acceptable in lieu of a patient's specific collaborative management agreement.

Specific Authority 467.005 456.004(5) FS. Law Implemented 467.015(2) FS. History–New 7-14-94, Formerly 61E8-7.010, 59DD-7.010, Amended

64B24-7.011 Administration of Medicinal Drugs.

- (1) A midwife licensed prior to October 1, 1992, may administer certain medicinal drugs during intrapartal, postpartal and neonatal care, if prior to administering such drugs, the licensee he or she has successfully completed a course in the practice of administering medicinal drugs within an approved training program.
 - (2) No change.
 - (3) The midwife may administer the following:
- (a) <u>Postpartum oxytocics</u> <u>Intramuscular administration of Pitocin, postpartal</u>.
 - (b) Prophylactic ophthalmic medication.
 - (c) Oxygen.
 - (d) Vitamin K, per os or intramuscular.
 - (e) RhO Immune Globulin.
 - (f) Local anesthetic.
 - (g) Other medications as prescribed by the physician.

(4) No change.

Specific Authority 467.005 456.004(5) FS. Law Implemented 467.006(2), 467.015(3) FS. History–New 7-14-94, Formerly 61E8-7.011, 59DD-7.011, Amended

64B24-7.012 Emergency Care Plan.

Specific Authority 456.004(5) FS. Law Implemented 467.017(1)(a)-(c) FS. History-New 7-14-94, Formerly 61E8-7.012, 59DD-7.012, Repealed

64B24-7.013 Requirement for Insurance.

- (1) Except as provided herein, applicants for licensure, applicants for licensure reactivation, and applicants for licensure renewal shall at the time of application submit proof of professional liability insurance coverage in an amount not less than \$100,000 per claim, with a minimum annual aggregate of not less than \$300,000 from an authorized insurer as defined under s. 624.09, F.S., from a surplus lines insurer as defined under s. 626.914 626.914(2), F.S., from a risk retention group as defined under s. 627.942, F.S., from the Joint Underwriting Association established under s. 627.351(4), F.S., or through a plan of self-insurance as provided in s. 627.357, F.S. All midwives licensed prior to December 31, 1997 shall have until December 31, 1999 to provide proof of professional liability insurance coverage in accordance with this subsection.
 - (2) through (4) No change.

Specific Authority 409.908(12) 409.908(12)(d), 467.005 FS. Law Implemented 409.908(12), 467.014 FS. History–New 7-14-94, Formerly 59DD-7.013, 61E8-7.013, Amended 5-4-98, 4-26-99,

64B24-7.014 Patient Records.

- (1) The midwife shall keep a record of each patient served. Such record shall contain:
 - (a) through (d) No change.
- (e) <u>A copy Copy</u> of <u>form DH511, Certificate of Live Birth,</u> the birth certificate form submitted to the registrar of vital statistics pursuant to s. 467.019(1), F.S.
 - (2) through (8) No change.

Specific Authority 467.004(3)(e), 467.005, 467.019 FS. Law Implemented 467.005, 467.019 FS. History–New 7-14-94, Formerly 61E8-7.014, Amended 3-20-96, Formerly 59DD-7.014, Amended

64B24-7.017 Exemption for Registered Nurses and Certified Nurse-Midwives.

Specific Authority 467.005, 467.006(2) FS. Law Implemented 467.006(2) FS. History–New 3-20-96, Formerly 59DD-7.017, Repealed_____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Eaton, Executive Director, Council of Licensed Midwifery, 4052 Bald Cypress Way, Bin C06, Tallahassee, Florida 32399-3256

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Amy Jones, Division Director, Department of Health, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C00, Tallahassee, Florida 32399-3250

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 8, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN THE FAW: May 24, 2002

Section III Notices of Changes, Corrections and Withdrawals

DEPARTMENT OF AGRICULTURE AND CONSUMER **SERVICES**

Division of Agricultural Environmental Services

RULE CHAPTER NO.: RULE CHAPTER TITLE:

Fertilizer 5E-1 RULE NOS.: RULE TITLES: 5E-1 014 Methods of Analysis

5E-1.026 Adulteration Levels for Metals in

Fertilizers; Certificate of

Analysis 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)., F.S., published in Vol. 28, No. 16, April 19, 2002, issue of the Florida Administrative Weekly.

The rule was approved as follows:

5E-1.014 No change.

5E-1.026 Adulteration Levels for Metals in Fertilizers; Certificate of Analysis.

(1) ADULTERATION LEVELS FOR METALS IN **FERTILIZERS**

(a) Fertilizers that contain guaranteed amounts of phosphates and/or micro nutrients are adulterated when they contain metals in amounts greater than the levels of metals established by the following table 1:

| <u>Metals</u> | ppm per 1% | ppm per |
|---------------|-----------------------------------|---------------------------------|
| | <u>P₂O₅</u> | 1% Micro nutrients ² |
| 1. Arsenic | <u>13</u> | <u>112</u> |
| 2. Cadmium | <u>10</u> | <u>83</u> |
| 3. Cobalt | 3,100 | <u>23,000</u> ³ |
| 4. Lead | <u>61</u> | <u>463</u> |
| 5. Mercury | 1 | <u>6</u> |
| 6. Molybdenum | <u>42</u> | <u>300</u> ³ |
| 7. Nickel | <u>250</u> | <u>1,900</u> |
| 8. Selenium | <u>26</u> | <u>180³</u> |
| 9. Zinc | <u>420</u> | <u>2,900</u> ³ |

To use the Table:

Multiply the percent guaranteed P₂O₅ or sum of the guaranteed percentages of all micro nutrients (Iron, Manganese, Zinc, etc...) in each product by the value in the appropriate column in the Table to obtain the maximum allowable concentration (ppm) of these metals. The minimum value for P₂O₅ utilized as a multiplier shall be 6.0. The minimum value for micro nutrients utilized as a multiplier shall be 1. If a product contains both P₂O₅ and micro nutrients multiply the guaranteed percent P₂O₅ by the value in the appropriate column and multiply the sum of the guaranteed percentages of the micro nutrients by the value in the appropriate column. Utilize the sum of the two resulting values as the maximum allowable concentrations.

Biosolids, and all compost products $\frac{4}{3}$, shall be adulterated when they exceed the levels of metals permitted by the United States Environmental Protection Agency Code of Federal Regulations, 40 CFR Part 503. Dried biosolids and manure, as well as manipulated manure products not supplemented with chemical fertilizers shall also be deemed adulterated when they exceed the levels of metal permitted by the United States Environmental Protection Agency Code of Federal Regulations, 40 CFR Part 503. Hazardous waste derived fertilizers (as defined by EPA) shall be adulterated when they exceed the levels of metals permitted by the United States Environmental Protection Agency Code of Federal Regulations, 40 CFR Parts 261.2(c), 266.20(a) and 268.40(i), dated May 14, 2002.

Footnotes:

- 1 These guidelines are not intended, to be used, to evaluate horticultural growing media claiming nutrients but may be applied to the sources of the nutrients added to the growing media.
- ² Micro nutrients (also called minor elements) are essential for both plant growth and development and are added to certain fertilizers to improve crop production and/or quality. These micro nutrients are iron, manganese, zinc, copper, molybdenum and boron. In addition, cobalt and selenium can also be considered micro nutrients.
- $\frac{3}{2}$ Only applies when not guaranteed.
- ⁴ Includes all compost products that are not supplemented with chemical fertilizers, even those registered as fertilizers (making nutrient claims).

(2) CERTIFICATE OF ANALYSIS

(a) Suppliers of micro nutrient and/or phosphate materials distributes to registered fertilizer licensees for blending purposes upon request shall furnish to the licensee and the Department a Certificate of Analysis of the nine metals denoted in section (1)(a).

Specific Authority 576.181 FS. Law implemented 576.181 FS. History-New