

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

68D-24.146 Okaloosa County Boating Restricted Area.

For the purpose of regulating the speed and operation of vessel traffic on the Florida Intracoastal Waterway within Okaloosa County, Florida, the following boating restricted area is established:

(1) Slow Speed Minimum Wake Zone

(a) Brooks Bridge – A Slow Speed Minimum Wake zone, shoreline to shoreline, in and adjacent to the Florida Intracoastal Waterway from 2,000 yards feet west of the centerline of the Brooks Bridge to 900 yards feet east of the centerline of the Brooks Bridge in Okaloosa County, as depicted in Drawing A.

(b) through (2) No change.

Specific Authority 327.04 FS. Law Implemented 321.46 FS. History–New 11-14-01, Amended.

THE FULL TEXT OF THE PROPOSED RULES IS:

3F-5.005 Procedure for Licensing Existing Cemeteries.

Specific Authority 497.103 FS. Law Implemented 497.103, 497.301, 497.237, 497.213 FS. History–New 9-29-75, Amended 11-2-78, 1-27-81, Formerly 3D-30.16, Amended 10-23-91, Formerly 3D-30.016, Amended 6-26-02, Repealed.

3F-5.007 Conversion Procedures.

Specific Authority 497.103 FS. Law Implemented 497.201, 497.213 FS. History–New 9-29-75, Amended 1-27-81, Formerly 3D-30.19, Amended 10-23-91, Formerly 3D-30.019, Amended 6-26-02, Repealed.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Funeral and Cemetery Services

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Board of Funeral and Cemetery Services

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 15, 2002

Section II Proposed Rules

DEPARTMENT OF BANKING AND FINANCE

Board of Funeral and Cemetery Services

RULE TITLES: Procedure for Licensing Existing Cemeteries 3F-5.005 Conversion Procedures 3F-5.007

PURPOSE AND EFFECT: The Board proposes to repeal these rules as they are now obsolete.

SUMMARY: These rules set forth procedures and identified forms necessary for licensing existing cemeteries and conversion procedures for existing cemeteries.

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: 497.103 FS.

LAW IMPLEMENTED: 497.103, 497.201, 497.213, 497.301, 497.237 FS.

IF REQUESTED IN WRITING 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: Diana Evans, Executive Director, Board of Funeral and Cemetery Services, 101 East Gaines Street, Tallahassee, FL 32399-0350

DEPARTMENT OF INSURANCE

RULE TITLES: Reasonableness of Benefits in Relation to Premiums

RULE NOS.: 4-149.005

Actuarial Memorandum and Definitions 4-149.006

Annual Rate Filing Procedures 4-149.007

PURPOSE, EFFECT AND SUMMARY: The amendments accomplish the following:

- Update the definition of Loss Ratio*N – Simplify the definition of loss ratio*N to make the test more efficient and effective. The amendments do not change the loss ratio test, but only the mechanism of demonstrating compliance.
• Technical corrections
• Clarify that rates do not have to be reduced if the loss ratio tests are not met within a 15% margin
• Add some definitions to help clarify the rules
• Enhance annual rate certification filings
• Add provision to allow an updating of the original duration loss ratio table

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: 624.308(1), 627.410(6)(b),(d),(e) FS.

LAW IMPLEMENTED: 627.410, 627.410(1),(2),(6), 627.410(6)(d),(e), 627.411(1)(e), 627.9175 FS.

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

TIME AND DATE: 9:30 a.m., September 24, 2002

PLACE: Room 116, Larson Building, 200 East 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 the person listed below.

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

THE FULL TEXT OF THE PROPOSED RULES IS:

4-149.005 Reasonableness of Benefits in Relation to Premiums.

(1) No change.

(2) A premium schedule is not excessive if the following are true:

(a) For a new pPolicy fForm, gGroup or iIndividual, the aAnticipated lLoss rRatio, as defined in Rule 4-149.006(3)(b)20., is not less than the indicated appropriate adjusted entry in the loss ratio tables, in subsection (4), below.

(b) For ~~an~~ individual forms, and group policy forms other than annually rated group pPolicy fForms, approved on or after 2/1/94 or issued on or after 6/1/94, the Premium Schedule satisfies the following 1. through 3., below:

1. An Anticipated Loss Ratio test such that the present value of projected claims is not less than the present value of expected claims over the entire future lifetime of the form. This is equivalent to the present value of the future A/E ratio not being less than 1.0; The current Anticipated Loss Ratio is not less than the greater of the initial filed loss ratio and the weighted average of the Anticipated Loss Ratios * N, as defined in Rule 4-149.006(4)(b), where the weights are the present value of premiums over the entire future lifetime by policy year or issue year; and

2. The current lifetime loss rRatio, as defined in Rule 4-149.006(3)(b)24., F.A.C., is not less than the initial filed loss ratio for the form; and

3. The Actual to Expected Claims Ratios, as defined in Rule 4-149.006(4)(a), for the Policy Form are, both in pattern and aggregate value, consistently at or in excess of .85.

(c) through (d) No change.

(3) through (4) No change.

(5)(a) Group conversion insurance, other than long-term care and Medicare supplement insurance, issued on either a group or an individual basis, is exempt from the loss ratios required above.

(b) The loss ratio for group conversion insurance shall not be less than 120 percent %.

(c) The insurer may charge the excess of the group conversion loss ratio over that required for group insurance on active lives to the experience for insurance on active lives.

(d) The premium to be charged for group conversion insurance subject to Section 627.6675, Florida Statutes, shall may not exceed the limits of Section 627.6675(3), Florida Statutes, based on the standard risk rates as established in Part X of this rule chapter.

(6) through (7) No change.

(8) A premium schedule shall not be disapproved on the grounds of inadequacy if:

(a) The expected profit margin on the policy form is non-negative. This margin equals the sum of premium income and investment income, minus the sum of benefit payments, expenses, taxes and contingency margins;

(b) The premium schedule incorporates for the entire future lifetime of the policy, as defined in paragraph 4-149.006(4)(f), F.A.C., the projected entire effects of insurance trend; and

(c) The premium schedule is determined such that if all assumptions are satisfied, the annual rate increases needed will not be greater than medical trend, as defined in subparagraph 4-149.006(3)(b)18., F.A.C.

(9) No change.

(10) Prohibitions. 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 policyholder or in unfair discrimination in sales practices, an example of which is inappropriate risk selection criteria.

(a) For all long term care policy forms and other pPolicy fForms under which more than 50 fifty percent (50%) of the policies/certificates are issued to persons age 65 or older, attained age premium structures, as defined in Rule 4-149.006(4)(c), are prohibited. Only premium structures which prefund the aging component of future claim costs are allowed.

(b) Select and Ultimate Premium Schedules, as defined in Rule 4-149.006(4)(p), are prohibited.

(c) Attained age premium schedules where the slope by age is substantially different from the slope of the ultimate claim cost curve are prohibited.

(11) For each Individual Policy Form that has been actively offered for sale in the twelve (12) months immediately preceding October 1, 1993, a continuation decision must be provided to the Department on or before May 1, 1994. For existing Policy Forms that will continue to be made available for purchase and for all Policy Forms filed and approved after February 1, 1994, availability for purchase of the Policy Form shall not be discontinued at any future date without penalty. The penalty imposed is that a new Policy Form providing similar benefits cannot be filed for a period of five (5) years

~~from the date of discontinuance, unless the Department determines that a shorter period is appropriate, as provided for in Section 627.410(6)(e), Florida Statutes.~~

Specific Authority 624.308(1), 627.410(6)(b),(d) FS. Law Implemented 627.410(6)(d),(e), 627.411(1)(e), 627.9175 FS. History—New 7-1-85, Formerly 4-58.05, 4-58.005, Amended 4-18-94, _____.

4-149.006 Actuarial Memorandum and Definitions.

(1) through (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 17. No change.

18. Trend Assumptions – Medical and Insurance:

a. This section must describe the trend assumptions used in pricing, ~~which These~~ assumptions must be appropriate for the specific line of business, product design, benefit configuration, and time period.

b. ~~Any and All~~ factors affecting the projection of future claims must be presented.

c. The trend assumptions shall be presented under two categories: ~~Medical and Insurance.~~

~~(I)a.~~ Medical Trend: is the combined effect of medical provider price increases, utilization changes, medical cost shifting, and new medical procedures and technology. In determining medical trend from underlying data, the analysis:

(A) Shall use credible data and make appropriate adjustments to claims data to isolate the effects of medical trend only; and

(B) Shall not include the effects of underwriting wearoff, aging, or changes to claim costs due to changes in demographics, policy coverages, geographic distribution, or reinsurance.

~~(II)b.~~ Insurance Trend: is the combined effect of underwriting wearoff, deductible leveraging, antiselection resulting from rate increases, and discontinuance of new sales.

(A) Medical trend must be determined or assumed before insurance trend can be determined.

(B) Underwriting wearoff means the gradual increase from initial low expected claims which result from underwriting selection to higher expected claims for later (ultimate) durations.

19. No change.

20. Anticipated Loss Ratio: This section shall provide the anticipated loss ratio. This loss ratio is defined as the present value of future benefits divided by the present value of future annual premiums computed over the Entire Future Lifetime of the Policy Form. The assumptions as to persistency and interest used in the present values must be justified and consistent with those used for pricing.

a. When claim cost projections include the effect of medical trend, such as for medical expense coverage, premium projections shall also include the effects of such trend. Projections shall assume future premium schedule increases consistent with benefit projections and medical trend.

b. This section shall also include the current approved durational loss ratio table for the form Anticipated Loss Ratio and the Anticipated Loss Ratio*N for each policy year.

(I) If a revised durational loss ratio table is being proposed, the proposed table, together with a justification for the new table, shall be provided.

(II) The proposed new table shall be consistent with the claim projections contained in the filing.

(III) If approved, the new table will be used in filings made subsequent to the one in which it is being proposed.

(IV) A new table shall produce a lifetime loss ratio at least as great as the lifetime loss ratio developed from the current approved loss ratio table and shall become the lifetime standard for the form.

(V)(A) When the slope or shape of the durational loss ratio table is changed, or the persistency or interest assumptions are changed, from those used in the last approved rate filing, any rate increase due to the change shall be uniformly implemented over a 3 year period.

(B) The insurer may request a shorter phase-in period if it can be demonstrated that the shorter period is not expected to result in the greater of a 5 percent reduction in persistency and a 25 percent increase in lapse rate from what had been assumed in the last approved rate filing.

(C) At its option, a company may request a new business rate schedule based on the full effect of the new assumptions with the phase-in period only applicable to inforce insureds.

(D) When a new business rate is elected, the rate analysis for the form shall be based on the new business rate schedule level.

21. through 22. No change.

23. Experience on the Form (Past and Future Anticipated): This section shall display the actual experience on the form and that expected for the future. Experience from inception (or the last three years for annually rated group coverages, with no separation of experience data by issue year required) shall be displayed, although, with proper interest adjustment, the experience for calendar years more than 5 five years in the past may be combined. For each calendar year and, where appropriate, each policy year or issue year, the following information shall be displayed:

a. Year,

~~b.~~ Collected premium,

~~b.e.~~ Earned premium,

~~c.-d.~~ Paid claims,

~~e.~~ Paid loss ratio (= (d)/(b)),

~~d.f.~~ Change in claim liability and reserve,

e.g. Incurred claims ~~(=(c)+(d))~~ ~~(=(d)+(f))~~

f.h. Incurred loss ratio ~~(=(e)/(b))~~ ~~(=(g)/(e))~~,

g. Expected loss ratio

h.i. Expected incurred claims,

i.j. Actual-to-expected claims ~~(=(e)/(h))~~ or equivalently ~~(=(f)/(g))~~ ~~((g)/(i))~~,

j.k. Active Life Reserves,

k. Earned premium on a manual rate basis for at least the past 5 calendar years or 3 years for annually rated group products; i.e., removing the impact of adjustments to the approved rate manual due to, underwriter adjustments, the impact of any rate limits and experience rating. This restatement to a manual basis does not apply to large group products exempt from the filing and prior approval of rate schedules.

l. Earned premium on a constant rate basis for at least the past 5 calendar years. This is not required for annually rated group products unless requested. For future years, all columns except (c), (d) and (l) ~~(e), (g), and (h)~~, shall be displayed. For periods where the actual claim runoff is complete, that data shall be displayed to replace ~~(d)(f)~~. ~~Past experience shall be presented on both an actual basis and a constant premium rate basis.~~ The experience exhibit shall be available to be submitted electronically in an Excel worksheet upon request directly to the assigned analyst.

24. Lifetime Loss Ratio: This is the loss ratio determined over the rating period for annually rated groups. For other forms, the loss ratio is derived by dividing A by B where:

a. A is the accumulation with interest of sum of the accumulated incurred claims from the original effective date of the pPolicy fForm to the evaluation date effective date of the revision, and the present value of future incurred claims over the Entire fFuture lLifetime of the pPolicy fForm; and

b. B is the accumulation with interest of sum of the accumulated earned annual premiums from the original effective date of the pPolicy fForm to the evaluation date effective date of the revision, and the present value of future earned annual premiums over the Entire fFuture lLifetime of the pPolicy fForm.

c. The evaluation date is the endpoint of the actual experience review period.

25. through 27. No change.

28. Actuarial Certification:

a. Certification by a qualified actuary that to the best of the actuary's knowledge and judgment;

(I) ~~T~~he entire rate filing is in compliance with the applicable laws of the State of Florida and with the rules of the Department of Insurance;

(II) ~~and~~ Complies with Actuarial Standard of Practice No. 8, "Regulatory Filings for Rates and Financial Projections for Health Plans," as adopted by the Actuarial Standards Board, January, 1989, which standard is hereby adopted and incorporated by reference;

(III) ~~that~~ The benefits are reasonable in relation to the proposed premiums.

b. In making the certification, the definition of reasonableness means that the premiums are not excessive, not inadequate, and not unfairly discriminatory as these terms are described in Rule 4-149.005, F.A.C.

c. A copy of the standard may be obtained from the Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance, Larson Building, Tallahassee, FL 32399-0328.

d. A qualified actuary is one who is member of the Society of Actuaries or the American Academy of Actuaries and who is qualified in the area of health insurance.

e. If the actuary provides a qualified opinion, a detailed explanation and reason for the qualification shall be provided as part of the certification.

f. In providing the actuarial opinion and certification, the actuary shall consider actuarial standards of practice and the qualification standards for prescribed statements of actuarial opinion.

(4) Definitions.

(a)1. Actual-to-Expected (A/E) Claims ratio: ~~The expected claims are the product of the anticipated loss ratio and the earned premium, both on a policy year or issue year basis.~~ The ratio of is actual incurred claims under the policy form divided by expected claims. This is equivalent to the actual annual loss ratio divided by the applicable durational loss ratios of the approved durational loss ratio table.

2. For projected periods, the A/E ratio is the ratio of the projected claims divided by the expected claims.

3. Both the year-by-year pattern of the A/E these ratios and the aggregate past, future, and lifetime inception to date total ratios shall be presented.

(b) Annually Rated Group Policies: Group policies, including major medical coverage, which meet all of the following criteria:

1. The policies are funded on a 1 year basis to satisfy loss ratio requirements.

2. The policies are expected to be repriced annually based on trend and demographic changes.

3. Effects of underwriting, if any, are part of the composite assumptions so that durational claims experience is incorporated into the composite rate.

4. Aging is not pre-funded, as in a Medicare supplement or long term care policy. Anticipated Loss Ratio*N: For each value of N, this is the anticipated loss ratio with the first (N-1) policy years removed and is read "the anticipated loss ratio star

~~N². The present value calculations use pricing assumptions. These values shall be provided for each policy year for each new policy filing. These shall be updated for each rate filing to reflect any change in the minimum lifetime loss ratio for the policy form.~~

~~(c) Anticipated Loss Ratio: The present value of future benefits divided by the present value of future premiums computed over the entire future lifetime of the policy form.~~

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

~~(f)(e) Credible Data:~~

~~1. Except as provided in 2., if a policy form has 2,000 or more policies in force, then full (100 percent %) credibility is given to the experience; if fewer than 500 policies are in force, then zero (0 percent %) credibility is given.~~

~~2. For policy forms with low expected claims frequency, such as accident and long term care, at least 1,000 claims, over a period not to exceed the most recent 5 year period, shall be assigned 100 percent credibility; 200 claims shall be assigned 0 percent credibility.~~

~~3. Linear interpolation is used for in force amounts between the low and high values in subparagraph 1. or 2. 500 and 2000.~~

~~4. For group policy forms, the numbers in this definition refer to individual group certificates or subscribers, not policies.~~

~~5. For coverage that is not subject to subparagraph 6. below, a combination of Florida and nationwide data shall be used only if Florida-only data is not fully credible, with the total credibility being the nationwide credibility level; i.e., if Florida data is 20 percent credible, and nationwide is 60 percent credible, the data will be weighted 20 percent Florida and 40 percent nationwide. If nationwide credibility is less than 100 percent credible, the compliment, 40 percent in the above example, shall be weighted for medical trend, to the degree applicable.~~

~~6. Due to the geographic pricing of medical expense coverage, Florida-only data shall be used for medical expense forms. When Florida data is not fully credible, the compliment of the experience credibility factor shall be weighted with medical trend. Specific alternate credibility standards for particular lines of business shall be submitted to the Department by affected insurers no later than 4/1/94. The Department shall consider such alternate standards and commence formal rulemaking no later than 6/1/94. Prior to and ending on the effective date of such rules, alternate credibility standards advanced by any insurer for a particular line of business shall be considered by the Department. In order for those alternate standards to be acceptable, the insurer must demonstrate that the standards are based on sound actuarial principles and that the resulting loss ratios are in substantial compliance with the requirements of Rules 4-149.003 and 4-149.006.~~

(g) Durational Loss Ratio Table: The table of annual loss ratios where a loss ratio is the ratio of incurred claims divided by earned premium for each policy duration, by policy duration determined from the original actuarial memorandum when the form was first approved;

1.a. The company shall adjust the durational loss ratio table when the average annual premium at the time of filing results in a loss ratio standard pursuant to the provisions of subsection 4-149.005(4), F.A.C., that is changed by at least .5 percent from the current lifetime loss ratio standard for the form. Each loss ratio in the durational loss ratio table shall be increased by the ratio of the loss ratio standard determined from the current average annual premium divided by the prior lifetime loss ratio standard;

b.(I) When the loss ratio is adjusted pursuant to 1.a. above, the lifetime loss ratio standard for the form shall be the prior lifetime standards weighted by the accumulated earned premiums applicable to each standard with the weight for the new lifetime loss ratio standard being the present value of projected premiums.

(II) If the company is unable to provide the historical information necessary to calculate the appropriate weighting, the new standard will be the lifetime loss ratio as determined by 1.a. above.

2. The approved durational loss ratio table is the durational loss ratio table contained in the filing when the form was originally approved, or any subsequent durational loss ratio table filed where the Department explicitly approved the table.

(h) Earned Premium:

1. The portion of the total premium paid by the insured attributable to the period of coverage elapsed. This includes all modal loadings, fees, or charges that are required to be paid by the insured.

2. Premium shall be earned uniformly over the period for which coverage is provided.

3. Sections 627.6043(2) and 627.6645(4), Florida Statutes, provide that the company may have a short rate table approved. If approved, the short rate table is used in lieu of uniform earning (pro-rata) for determining refunds upon cancellation, and shall not be incorporated for rate filing purposes.

(i)(f) Entire Future Lifetime: This is the maximum period over which the policy would be in effect if not terminated by action of the insurer or the insured.

1. For individual and group policies other than annually rated group policies, the minimum acceptable period for calculation purposes is the number of years before fewer than (5) percent % of the original policyholders or certificateholders remain in force. This period is determined using the anticipated termination rates for the form.

2. For annually rated group policies, the eEntire fFuture lLifetime is the rating period. Policy Forms which have had rate revisions prior to the effective date of this rule with a projection period shorter than the entire lifetime of the policy

shall, for the purposes of computing loss ratios, continue to use the same number of years in the projection period for future rate revisions.

(j)1. Expected Claims: The actual earned premium or, for projected periods the projected premium, times the applicable policy durational loss ratio from the approved durational loss ratio table which was in effect for the time period covered by the premiums.

2. For annually rated group policies, this reflects the actual target loss ratio for the group; i.e., reflecting different retention loads based on group differences.

(g) through (i) renumbered (k) through (m) No change.

(n) Incurred Claims: Incurred claims are claims occurring within a fixed period, whether or not paid during the same period, under the terms of the policy form.

1. Claims include scheduled benefit payments, reimbursement benefit payments, or services provided by a provider or through a provider network for medical, dental, vision, disability, and similar health benefits.

2. Claims do not include state assessments, taxes, company expenses, or any expense incurred by the company for the cost of adjusting and settling a claim, including the review, qualification, oversight, management or monitoring of a claim or incentives or compensation to providers for other than the provision of health care services.

3. A company may at its discretion include costs that are demonstrated to reduce claims, such as a fraud intervention program or case management costs, which are identified in each filing, and are demonstrated to reduce claims costs and do not result in increasing the experience period loss ratio by more than 5 percent.

4. For scheduled claim payments, such as disability income or long term care, the incurred claims shall be the present value of the benefit payments discounted for continuance and interest.

(j) through (n) renumbered (o) through (s) No change.

(t)(~~o~~) Renewal Clauses:

1. through 2. No change.

3. ~~a.~~ Guaranteed Renewable means includes:

a. Policy forms where the that renewal cannot be declined by the insurer for any reason other than fraud, misrepresentation, or failure to pay the premium when due, or expiration of the contract, but the insurer can revise rates on a class basis.

b.(I) Policy forms subject to Section 627.6425 or 627.6571, Florida Statutes.

(II) When an insurer discontinues offering a particular policy form for health insurance coverage pursuant to Section 627.6425(3)(a), Florida Statutes, the nonrenewal of coverage shall occur on the policy anniversary, and the offer of new coverage pursuant to Section 627.6425(3)(a)2., Florida Statutes, shall be considered a renewal of coverage and shall be

renewed on the policy anniversary at the same class basis as the coverage being discontinued. If the forms do not have consistent class definitions, the class shall be determined based on the original application and underwriting status of the individual when the discontinued coverage was first issued. For policy forms subject to Section 627.6571, Florida Statutes, the renewal or nonrenewal of coverage shall be coincident with the effective date of coverage when the group is rerated, which is generally the annual anniversary of the group.

4. through 5. No change.

(u)(~~o~~) Select and Ultimate Premium Schedule: This is any premium schedule which has premiums that vary based on the time elapsed since issuance of the policy. These do not include rate schedules that reduce due to temporary risk charges, a one-time policy fee, or policyholder action to reduce benefits.

(v)(~~o~~) No change.

Specific Authority 624.308(1), 627.410(6)(b),(e) FS. Law Implemented 627.410(1),(2),(6), 627.411(1)(e) FS. History—New 7-1-85, Formerly 4-58.06, 4-58.006, Amended 4-18-94, 4-9-95,_____.

4-149.007 Annual Rate Filing Procedures.

(1)(a) This rule applies to every insurer writing health insurance, defined as insurance of human beings against bodily injury, disablement, or death by accident or accidental means, or the expense thereof, or against disablement or expense resulting from sickness, and every insurance appertaining thereto but excluding workers' compensation coverages.

(b) Policies and forms identified in Rule 4-149.002(5), F.A.C., which are indicated to be subject to only those rules in effect on October 1, 1993, are not subject to Rule 4-149.007(5)(a), F.A.C., but are subject to the filing provisions of Rule 4-149.007(5)(b) or (c), F.A.C., for the annual rate certification required by Section 627.410(7)(b)2., Florida Statutes.

(2) Each insurer shall make an annual filing with the Department for each policy form or pooled block of forms 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 October 1, 1989, but in no event later than March 1, 1990, or 14 months after the date of its last rate filing approval date preceding October 1, 1989.~~

(b) ~~Subsequent rate filings shall be submitted no later than 12 months after the previous filing approval date for each policy form.~~

(3) through (4) No change.

(5) Filing Preparation. Filings shall be prepared in accordance with Rule 4-149.003, and in accordance with either (a), or (b), or (c) below.

(a) ~~For significant blocks of business (defined as 500 or more policies or certificates in force nationwide), filings shall be in accordance with either 1., 2., or 3., below:~~

~~(a)1-~~ A rate filing in accordance with Rule 4-149.003, F.A.C., which shall be prepared under the direction of an actuary and which contains documentation that the proposed benefits are reasonable in relation to the premium rates, pursuant to the applicable rating laws and rules adopted by the Department.

~~(b)2-~~ If no rate change is proposed and the form is other than Medicare supplement, a filing shall be prepared which consists of:

1. A cover letter indicating the nature of the filing;
2. A copy of standardized data letter, Form DI4-1507, as adopted in Rule 4-149.022, F.A.C.; and
3. A certification by an actuary, in accordance with Rule 4-149.006(3)(b)28., F.A.C. that benefits are reasonable in relation to premiums currently charged in accordance with the applicable rating laws and rules adopted by the Department. Such certification shall is to be attached to the applicable standardized data letter, as adopted in Rule 4-149.022.

~~(b) For insignificant blocks of business (defined as desired by the company but no greater than 500 policies in force nationwide):~~

- ~~1. By any of the methods described in paragraph (a), above.~~
- ~~2. The Department may waive the requirement for a certification of reasonableness so long as the insurer's solvency is not affected.~~

~~(c) For noncredible blocks of business on a nationwide basis, the company may request a waiver of the requirement. The request shall be made annually and be accompanied by a letter indicating the nature of the filing, the type of product, and the reason for the request. As used in this rule, "actuary" means an individual who is a member of the Society of Actuaries or the American Academy of Actuaries and who is qualified in the area of health insurance.~~

~~(6) When a company using a current rate schedule is unable to demonstrate that the minimum loss ratio standards in Rule 4-149.005, F.A.C. are met, it shall reduce rates, enhance benefits, or a combination of both to satisfy the standards. Requests for Extension. If a filing is under preparation on the date it is required to be filed, the insurer may apply to the Department for an extension for up to an additional 30 days in which to submit the filing. The request for an extension shall be received by the Department in Tallahassee prior to the date the filing is due.~~

~~(a) A company may make a certification in compliance with paragraph (b) above without such change to benefits or premiums if the A/E ratio for the past experience periods are, both in pattern and aggregate value, consistently at or in excess of .85.~~

~~(b) In determining the necessary adjustment, the company may assume up to a 15 percent margin in future projected claim costs and may target a future and lifetime actual to expected ratio of .85.~~

~~(7) Filing Date. A filing is considered to be made with the Department on the date the filing is received by the Department.~~

Specific Authority 624.308 FS. Law Implemented 627.410 FS. History--New 5-14-92, Amended.

NAME OF PERSON ORIGINATING PROPOSED RULE:
 Frank Dino, 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, Chief, Bureau of Life and Health Forms and Rates, Division of Insurer Services, Department of Insurance
 DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 29, 2002
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: April 19, 2002

DEPARTMENT OF INSURANCE

RULE TITLE: Workers Compensation: Application and Audit Procedures
 RULE NO.: 4-189.003
 PURPOSE, EFFECT AND SUMMARY: To update Rule 4-189.003 due to changes required by SB 108 as it pertains to application procedures.
 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: 440.381 FS.
 LAW IMPLEMENTED: 440.381, 624.307, 624.308(1) 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: 2:00 p.m., September 24, 2002
 PLACE: Room 116, Larson Building, 200 East 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 the person listed below.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Theresa Eaton, Property and Casualty Forms and Rates, Department of Insurance, 200 East Gaines Street, Tallahassee, Florida 32399-0330, (850)413-3821

THE FULL TEXT OF THE PROPOSED RULE IS:

4-189.003 Workers' Compensation: Application and Audit Procedures.

(1)(a) Each employer applying to a carrier in the voluntary market for workers' compensation coverage required by Section 440.38, Florida Statutes, shall use Form ACORD 130-FL (rev. 7/02) (rev. 8/00), "Florida Workers' Compensation Application," which is hereby adopted and incorporated by reference. Carriers are authorized to continue to use Form ACORD 130-FL (rev. 8/00) (rev. 3/96), "Florida Workers' Compensation Application," which was previously adopted until the current supply of forms is exhausted. The form shall be completed and submitted to the carrier with which the employer wishes to contract for coverage.

(b) A carrier wishing to use its own application form shall submit the form to the Bureau of Property and Casualty Forms and Rates, Division of Insurer Services, Department of Insurance, Larson Building, Tallahassee, FL 32399-0330, and receive approval prior to its use.

1. At a minimum the form shall require the employer to provide the following information:

- a. Name, address, and legal status of the employer;
- b. Federal employer identification number;
- c. Type of business and contractor licensing number if the employer is a contractor;
- d. Rating information including past and prospective payroll;
- e. Estimated revenue;
- f. Locations;
- g. List of officers, sole proprietors and partners including their social security numbers (disclosure of social security number is voluntary; as an alternative, attach a copy of exclusion or inclusion forms filed with the state);
- h. List of all employee names, employees' social security numbers and classifications (disclosure of social security numbers is voluntary; as an alternative, the latest UCT-6 form with class codes added can be used in lieu of a separate listing of employee names, employees' social security numbers and classifications);
- i. Previous workers' compensation experience;
- j. Former business names and predecessor companies for the last five years;
- k. Former and current owners in the last five years;
- l. All names under which the corporation operates; and
- m. Any other information necessary to enable the carrier to accurately underwrite the employer.

2. The application shall contain a statement that the filing of an application containing false, misleading, or incomplete information with the purpose of avoiding or reducing the amount of premiums for workers' compensation coverage is a felony of the third degree.

3. The application shall contain a sworn statement by the employer attesting to the accuracy of the information submitted.

4. The application shall contain a sworn statement by the agent attesting that the agent explained to the employer or officer the classification codes that are used for premium calculations.

(c) Each employer applying for workers' compensation coverage in the Florida Workers' Compensation Joint Underwriting Association (FWCJUA) shall use ACORD Form 130-FL (rev. 7/02) (rev. 8/00) unless the FWCJUA files and receives approval by the Department of Insurance to use a different application form in accordance with paragraph (1)(b). The FWCJUA shall submit any addendum to the application to the Department and receive approval prior to using. The completed application and all addenda addendum shall be submitted to the FWCJUA at the address on the form.

(d) No change.

(2) through (4) No change.

Specific Authority 440.381 FS. Law Implemented 440.381, 624.307, 624.308(1) FS. History--New 8-1-91, Formerly 4-28.007, Amended 10-3-95, 10-10-96, 1-15-98, 11-21-00.

NAME OF PERSON ORIGINATING PROPOSED RULE: Theresa Eaton, Bureau of Property and Casualty Forms and Rates, Department of Insurance

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Shirley Kerns, Bureau Chief, Life and Health Forms and Rates, Department of Insurance

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: June 20, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: May 31, 2002

DEPARTMENT OF INSURANCE

Division of State Fire Marshal

RULE CHAPTER TITLE:	RULE CHAPTER NO.:
Firesafety in Educational Facilities	4A-58
RULE TITLES:	RULE NOS.:
Administration	4A-58.001
Scope: Existing Facilities	4A-58.002
Definitions	4A-58.003
Firesafety Inspections	4A-58.004
Serious Life Safety Hazards	4A-58.005
Inspections in General	4A-58.006
Counties, Municipalities, and Special Districts	
Having Firesafety Responsibilities,	
Without Firesafety Inspectors	4A-58.007
Standards and Requirements for Buildings	4A-58.008
Florida School Evaluation System	4A-58.009

PURPOSE AND EFFECT: To provide rules containing procedures for firesafety inspections and firesafety standards in educational facilities, pursuant to the mandate in House Bill 443, amending Section 235.06, Florida Statutes.

SUMMARY: This rule chapter establishes uniform requirements to provide a reasonable degree of safety from fire in existing buildings by providing firesafety procedures and firesafety standards for educational facilities, educational plants, ancillary plants, and auxiliary facilities under a school board or a community college board of trustees' jurisdiction.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Regulatory Costs was prepared.

Any person who wishes to provide information regarding the statement of 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: 235.06 FS.

LAWS IMPLEMENTED: 235.06 FS.

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

TIME AND DATE: 8:30 a.m., September 24, 2002

PLACE: Department of Environmental Protection Conference Room, 2nd Floor, 400 North Congress Avenue, West Palm Beach, Florida

TIME AND DATE: 8:30 a.m., September 26, 2002

PLACE: Room 116, Larson Building, 200 East 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: Millicent King, (850)922-3171.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Jim Goodloe, Chief, Bureau of Fire Prevention, 200 East Gaines Street, Tallahassee, Florida 32399-0342

THE FULL TEXT OF THE PROPOSED RULES IS:

4A-58.001 Administration.

The division in consultation with the Department of Education hereby adopts firesafety rules for the use by boards and local fire officials when conducting firesafety inspections of existing buildings located in educational facilities, educational plants, ancillary plants, and auxiliary facilities to ensure the safety of occupants.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History—New

4A-58.002 Scope: Existing Facilities.

(1) This rule chapter establishes uniform requirements to provide a reasonable degree of safety from fire in existing buildings located in educational facilities, educational plants, ancillary plants, and auxiliary facilities under a school board or a community college board of trustees' jurisdiction.

(2) Nothing in this rule chapter is intended to be more restrictive than a similar requirement for new construction.

(3) This rule chapter includes procedures for withdrawal of sites and facilities from use until unsafe conditions are corrected.

(4) These rules apply to charter schools built on school district property and to charter schools electing to be constructed to State Requirements for Educational Facilities, Chapter 7 Standards, or Florida Building Code, Section 423 Standards. Charter schools that are not located on school district property and elect not to be constructed under State Requirements for Educational Facilities, Chapter 7 Standards, or Florida Building Code, Section 423 Standards, shall meet the firesafety standards set forth in NFPA 1 and NFPA 101, the editions as adopted in Rule 4A-3.012, Florida Administrative Code.

(5) Existing educational and ancillary facilities shall comply with NFPA 101, the edition adopted in Rule 4A-3.012, Florida Administrative Code, except as modified by Chapter 235, Florida Statutes, and this rule chapter.

EXCEPTION: NFPA 101, horizontal exits, which are referred to in subdivision 15-2.2.5," and exit passageways, which are referred to in subdivision 15-2.2.7," are not permitted.

(6) Anytime NFPA 101 refers to any other NFPA standard, the referenced standard shall be the edition adopted in Rule 4A-3.012, Florida Administrative Code.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History—New

4A-58.003 Definitions.

As used in this rule chapter, the following definitions apply:

(1) "Ancillary plant" is comprised of the building, site, and site improvements necessary to provide such facilities as vehicle maintenance, warehouses, maintenance, or administrative buildings necessary to provide support services to an educational program.

(2) "Authority having jurisdiction" means the county, municipality, or special district having firesafety responsibility or, where the context requires, the State Fire Marshal.

(3) "Auxiliary facility" means the buildings located at educational plants which are not designed for student occupant stations.

(4) "Board" means a district school board, a community college board of trustees, and the Board of Trustees for the Florida School for the Deaf and Blind, and includes any person legally authorized by the board to act on its behalf. The term "board" does not include the State Board of Education or any board of any university.

(5) "Building" or "board building" means any building or structure located on, upon, or in any educational facility, educational plant, ancillary plant, or auxiliary facility owned, rented, leased, or under lease-purchase agreement or

lease-purchase option with a board. “Building” includes any permanent, fixed, relocatable, and manufactured building or structure.

(6) “Division” means the Division of State Fire Marshal.

(7) “Educational facilities” means the buildings and equipment, structures, and special educational use areas that are built, installed, or established to serve primarily the educational purposes and secondarily the social and recreational purposes of the community and which may lawfully be used as authorized by the Florida Statutes and approved by the boards.

(8) “Educational plant” comprises the educational facilities, site and site improvements necessary to accommodate students, faculty, administrators, staff, and the activities of the education program of each plant.

(9) “Existing” facility means a facility that has been occupied for one year or longer.

(10) “Florida Building Code” means the Florida Building Code as adopted in Rule 9B-3.047, Florida Administrative Code, adopted pursuant to Section 552.73, Florida Statutes.

(11) “Florida Fire Prevention Code” means the Florida Fire Prevention Code as adopted in Rule 4A-3.012, Florida Administrative Code.

(12) “Local fire official” or “fire official” means a firesafety inspector certified under Section 633.081(2), Florida Statutes, and employed by or under contract with a county, municipality, or special district having firesafety responsibilities, and includes the chiefs of county, municipal, and special district fire departments. The term does not include a special state firesafety inspector employed by the board certified to conduct inspections of buildings as defined herein under Section 633.081(3), Florida Statutes.

(13) “New” facility means a facility that has not been occupied for more than one year.

(14) “NFPA 101” means National Fire Protection Association Code 101, the Life Safety Code, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

(15) “Special district that has firesafety enforcement responsibilities” means a special fire control district or a special district which was created for the purposes of fire prevention, fire suppression, or fire protection.

(16) The definitions in Section 235.011, Florida Statutes, of words and terms found in Section 235.06, Florida Statutes, or of words or terms found in this rule chapter apply to this rule chapter.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History—New

4A-58.004 Firesafety Inspections.

(1) There shall be two annual inspections of educational facilities, ancillary plants, and auxiliary facilities, as follows:

(a) Pursuant to Section 235.06(1)(b), Florida Statutes, firesafety inspections of each building of educational plant and each ancillary plant shall be made annually by a person certified by the division to conduct firesafety inspections of educational and ancillary plants pursuant to Section 633.081(3), Florida Statutes, which may be an employee of the board.

(b) Pursuant to Section 235.06(2)(b), Florida Statutes, each county, municipality, or special district having firesafety responsibilities shall, by and through a local firesafety inspector, conduct at least one firesafety inspection of each building of each educational plant and each ancillary plant, whether owned or leased, each calendar year to determine compliance with this rule chapter.

(2) The inspections in subsection (1):

(a) Are applicable to all buildings owned, leased, or being lease-purchased by the board, including all permanent and relocatable buildings;

(b) Shall begin not sooner than one year after a new building has been occupied;

(c) Shall be performed in accordance with any applicable code or standard, such as NFPA 101, the edition as adopted in Rule 4A-3.012, Florida Administrative Code, or any other applicable code or standard which has been adopted in this rule chapter; and

(d) Are not applicable to new buildings. New buildings are controlled by Sections 235.218 and 235.26, Florida Statutes.

(3) Reports of the inspections in subsection (1) shall be filed with the local school board and the local site administrator.

(4) A plan and schedule for correction of any deficiency in the inspection report shall be developed by any firesafety inspector finding a deficiency in conjunction with the board and shall be adopted and complied with by the board.

(5) Each inspection report and plan of correction shall contain, at a minimum, the following information:

(a) The Name of the School District;

(b) The Name of the Local Authority Having Jurisdiction (i.e., municipality, county, or special district);

(c) The Name of the Facility Inspected;

(d) The Type of Facility Inspected (i.e., K-5, 6-9, 10-12, CC, Other);

(e) The Facility Address;

(f) The Number of the Facility as Listed in the Florida Inventory of School Houses (FISH #);

(g) The Name, Address, and Phone Number of Each Inspector, and the Designation of Whether Such Inspector is a Special Firesafety Inspector or a Municipal Firesafety Inspector;

(h) The Date of the Inspection;

(i) Each Violation or Deficiency Noted During the Inspection. Each Violation or Deficiency Report Shall Contain:

1. The Building Name or Number and, if Applicable, the Room Number of the Building in which the Violation was Noted;

2. A Description of the Violation or Deficiency;

3. The Number of Times this Violation or Deficiency has been Cited, if Applicable;

4. The Estimated Correction Date;

5. The Total Number of Violations or Deficiencies Cited not Involving Serious Life Safety Hazards;

6. The Total Number of Violations or Deficiencies Cited Involving Serious Life Safety Hazards;

7. A statement that the District has or has not complied with Section 235.06(1)(c), Florida Statutes;

8. A statement that the local authority having jurisdiction has or has not complied with Section 235.06(2)(c), Florida Statutes;

9. Verification that the Required Fire Drills have been Completed; and

10. The Signature of the District Inspector if the Inspection was Made by the Special Inspector, or the Signature of the Local Fire Official if the Inspection was Made by the Local Fire Official. If the Inspection was Made by Both the Special Firesafety Inspector and the Local Fire Official, Each One Must Sign.

(6) When the violation or deficiency has been corrected, the inspector sending the report required by paragraph (i) shall notify the division of such correction.

(7) The inspection reports in subsection (1) together with the plan and schedule for correction of any deficiency shall be submitted to the division by June 30, of each year.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History—New

4A-58.005 Serious Life Safety Hazards.

(1) Serious life safety hazards as set forth in Section 235.06, Florida Statutes, and in paragraph (b), below, require prompt corrective action by the board or withdrawal of the educational or ancillary plants from use until corrected.

(2)(a) Serious life safety hazards include:

1. Non-functional fire alarm systems;

2. Non-functional fire sprinkler system;

3. Doors with padlocks or other locks or devices which preclude egress at any time;

4. Inadequate exits;

5. Hazardous electrical system conditions;

6. Potential structural failure;

7. Storage conditions that create a fire hazard;

(b) Other conditions may be identified to the division by the authority having jurisdiction for designation as a serious life safety hazard, including:

1. Placement of functional smoke and heat detectors in a manner not consistent with NFPA 72, the edition as adopted in Rule 4A-3.012, Florida Administrative Code;

2. Inaccessible or expired fire extinguishers; and

3. Fire doors with doorstops or wedges holding them open.

(c) The criteria to be used by the division to determine whether such other condition shall be designated as a serious life safety hazard shall be the same criteria as is applied in Section 120.54(4), Florida Statutes, to determine whether a condition presents an immediate and serious danger to the health, safety, and welfare of the public or of persons within, or making use of, the educational facility, educational plant, ancillary plant, or auxiliary facility, requiring an emergency rule.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History—New

4A-58.006 Inspections in General.

(1) Each building inspected shall be accounted for on the inspection form.

(2) The board shall forward one copy of the completed inspection report to the division and retain one copy for its files.

(3) The board shall maintain with each yearly inspection report a list of corrected deficiencies from the prior fiscal year report.

(4) Remodeling and Renovation shall be performed in accordance with the requirements of the Florida Building Code Section 423.

(5) Returning Buildings to Use. Any existing building which has been removed from instructional use for more than 180 days shall be inspected for deficiencies, and remodeled, renovated, or have its deficiencies corrected in accordance with the new construction requirements of the Florida Building Code before returning it to instructional purposes.

(6) Abandoned Buildings. Board buildings no longer in use and abandoned shall be free of combustible waste and secured in such a manner as to prevent safety hazards, unlawful entry, and undue vandalism from occurring.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History—New

4A-58.007 Counties, Municipalities, and Special Districts Having Firesafety Responsibilities, without Firesafety Inspectors.

(1) Any county, municipality, or special district having firesafety responsibilities which does not employ or has not contracted with a firesafety inspector certified under Section 633.081(1), Florida Statutes, at the time of the adoption of this rule chapter may contact the division and request that the division perform the inspections required by Section 235.06, Florida Statutes, and this rule chapter and performed under Section 633.081(1), Florida Statutes.

(2) Upon receiving such request, the division shall perform the inspections required by this rule chapter during the period of time the county, municipality, or special district does not employ or is not under contract with a firesafety inspector certified under Section 633.081(1), Florida Statutes not, however, to exceed one annual inspection per facility.

(3) Each such county, municipality, or special district having firesafety enforcement responsibilities shall, if practicable, employ or contract with a firesafety inspector certified under Section 633.081(1), Florida Statutes, pursuant to the requirement of Section 633.081(1), Florida Statutes, within one year after the county, municipality, or special district first contacted the division requesting the division to perform the inspection.

(4) No county, municipality, or special district having firesafety enforcement responsibilities which employs or contracts with a firesafety inspector as of the effective date of Section 1013.12, Florida Statutes, is authorized to request that the State Fire Marshal perform the inspections referred to in this section, and the State Fire Marshal shall not perform any inspection for such county, municipality, or special district having firesafety responsibilities.

Specific Authority 235.06 FS, Law Implemented 235.06 FS, History—New

4A-58.008 Standards and Requirements for Buildings.

(1) General Safety Requirements for all buildings in all facilities or plants.

(a) Rooms used for pre-kindergarten through grade 1 shall not be located above or below the level of exit discharge.

(b) Rooms used for grade 2 students shall not be located more than 1 story above the level of exit discharge.

(c) Means of Egress. Every building and space shall have sufficient exits arranged so as to provide safe egress for occupants, and every occupied space shall be maintained and operated so as to permit prompt egress in case of fire or emergency.

(d) Handrails on stairs and ramps shall not project more than 3 1/2 inches inside the measured width on each side of a means of egress.

(e) The clear width of a means of egress shall be free of any pipes, lockers, planters, water fountains, fire hose cabinets, or other projections.

(f) All required means of egress at the level of exit discharge shall terminate at a public way or at an exterior exit discharge.

(g) Every floor of every building shall have a minimum of 2 separate exits as remote from each other as practicable.

(h) Every classroom and space normally subject to student occupancy, except in fully sprinklered buildings, shall have at least 1 window or door to the exterior.

(i) Abandoned Structures. Abandoned structures owned by the board shall be maintained and secured to eliminate hazards, unlawful entry, and vandalism.

(2) Means of Egress.

(a) Every classroom or space normally subject to student occupancy shall have:

1. At least 1 door opening directly to the exterior; or

2. A protected interior means of egress shall maintain its original fire rating but shall not be less than an estimated 1/2 hour rating.

a. All doors in the corridor shall be self-closing doors.

b. Door stops or other unprotected openings in the corridor wall shall be prohibited.

3. Accessory rooms serving as adjunct facilities to a larger room may exit through the larger room.

4. EXCEPTION: Under the NFPA principle of "Equivalency Concepts" referred to in NFPA 101, Section 1-5, as an alternative method of exiting interior classrooms where existing classrooms are surrounded by existing corridors, and in lieu of a full fire sprinkler system, classrooms shall have 2 doors at opposite ends of each classroom exiting into separate smoke compartments of a smoke-proof corridor.

(b) Opposite swinging smoke stop doors in smoke partitions within the corridor shall provide the separation between the exits from each classroom.

(c)1. Exits shall be maintained so that the total length of travel from any point in the building (including places of assembly) to an exit does not exceed 150 feet.

2. EXCEPTION: In a building equipped with a fully automatic fire sprinkler system, the travel distance to an exit may be increased to 200 feet.

3. Exit distance shall be measured along the path of natural travel.

(d) Open mezzanines shall be permitted to exit to the exterior from within the space below.

(e) Every corridor, aisle, balcony, and other means of egress to exits and exit discharges shall be in accordance with the following:

1. Corridors shall be arranged so that each end leads to an exit and shall be without pockets or dead ends more than 20 feet in length.

2.a. The clear width of all interior corridors shall be maintained to a minimum width of 6 feet.

b. Hallway widths in office or service areas shall be a minimum of 44 inches in width and shall not exceed 50 feet in length.

3. Interior corridors, including contiguous dead-end and cross corridors, shall be divided by smoke stop doors into sections not to exceed 300 feet in length.

4. Exterior (open) corridors or balconies serving as a required means of exit shall be open to the outside air and shall be enclosed only by a guardrail or balustrade.

5.a. Balconies shall have guardrails or balustrades a minimum of 42 inches high with balusters spaced not more than 4 inches apart.

b. A bottom rail shall be spaced not more than 2 inches above finished floor.

c. In facilities designed prior to October 18, 1994, the maximum spacing of balusters may be increased to 6 inches apart.

6.a. The facility shall have stairs or exits from each exterior corridor or balcony to the level of exit discharge.

b. Floors of balconies, exterior corridors, and stairs shall be solid and without openings.

c. Floors of balconies and exterior corridors shall be designed to minimize water accumulation on their surfaces.

d. The minimum clear width of exterior corridors and balconies shall be maintained at no less than 60 inches of clear width.

(f) Interior Stairs, Exterior Stairs, and Smoke-Proof Towers.

1. Interior stairs, exterior stairs, and smoke-proof towers shall:

a. Be maintained in a safe and secure condition at all times; and

b. Be free of any loose or broken treads or risers.

2. Treads shall be designed with a uniform depth, and risers shall be designed with a uniform height in any flight of stairs.

3. Stair treads and landings shall be solid, without perforations, and free of projections that would present a tripping hazard.

4. Differences in floor elevations that require fewer than 3 risers shall be ramped.

5. The maximum difference in floor elevation at doorways in a path of egress shall be 1/2 inch.

6. The minimum clear width of stairways serving as a required means of egress shall be maintained at a minimum of 44 inches.

7.a. All interior stairways shall be enclosed in accordance with section 7.2.2.5 of NFPA 101, the edition as adopted in Rule 4A-3.012, Florida Administrative Code, and shall open directly to the exterior, or into a protected vestibule, or into a corridor that opens to the exterior.

b. EXCEPTION: Stairways need not be enclosed when:

(I) Serving only one adjacent floor and the stair is not connected to a corridor or other stairways serving other floors; or

(II) Stairways lead directly to an open mezzanine.

8. The open space beneath a required stair shall not be used as a closet, for storage, or any other purpose.

9. Exterior (open) stairs and ramps serving as required means of egress shall be enclosed only by a handrail or balustrade.

10. Openings within 15 feet of the stairway shall be protected by fire doors, fire-rated glazing, or fixed labeled wire glass.

11. For existing facilities constructed after April 28, 1997, exterior stairs shall be required to provide protection on the walls for 10 feet horizontally and vertically.

12. Handrails no less than 34 inches and no more than 38 inches in height shall be provided on both sides of required stairs and ramps.

13. Any stair 88 inches or more in width shall have an intermediate handrail.

14. Non-required stairs that are less than 44 inches in width and all stage steps shall have a minimum of 1 handrail.

15. Handrails shall be maintained in a safe and secure condition at all times and shall be capable of supporting a human impact applied at any point and in any direction.

16. Handrails shall allow for continuous grasp of the rail.

17. Doors separating enclosed stairways from egress corridors shall be self-closing fire doors and shall swing in the direction of exit travel.

18. Doors held open with approved devices shall release the door within 10 seconds upon activation of the fire alarm.

19. Balconies open to the outside air shall connect smoke proof towers to the permanent building.

20. Stairways shall be completely enclosed by non-combustible materials, and walls separating the enclosure from the building shall be free of any openings.

21. Access to smoke-proof towers shall be provided from every floor by vestibules or balconies, and all balconies or vestibules shall have guardrails.

22. Wall openings in exposed balconies or vestibules shall be protected from fire exposure.

23. Fire escape stairs, where existing, shall not constitute more than 50 percent of the required exit capacity and shall be maintained in a safe and secure condition at all times.

24. Interior corridors and stairwells shall be free of piping systems for flammable liquids or gases.

(3) Separation of Spaces.

(a)1. A separate storage space, in accordance with Section 8.2.5 of NFPA 101, the edition as adopted in Rule 4A-3.012, Florida Administrative Code, shall be provided for all material that is flammable, poisonous, or hazardous, and all equipment powered by internal combustion engines and fuels.

2. These separate storage spaces shall be enclosed and shall open to the exterior only.

(b) Interior vertical openings such as stairways, elevator shafts, light and ventilation shafts and all service chutes between floors shall be enclosed or protected to prevent the spread of fire and smoke, and shall be maintained in their original fire and smoke-tight condition.

(c) Hazardous areas shall be protected in accordance with Section 8-4, NFPA 101, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

(d)1. Openings in walls or ceilings which were designed with fire-resistant rated construction to prevent the spread of fire or smoke shall have fire doors and rated assemblies (frame, door closer, hardware) and fire-rated glass assemblies (wire or fire-rated glazing in steel frames) consistent with the fire-rating of the wall or ceiling.

2. Such protection shall be maintained to prevent the spread of fire or smoke.

3. Penetrations in fire-resistant rated construction shall be sealed with approved materials and methods to maintain original fire- and smoke-tight condition.

(e) Firestopping. Any concealed space, such as a utility chase, attic, crawl space, or other vertical or horizontal opening between floors in which combustible material is exposed shall either:

1. Be firestopped and provided with a heat detector, or

2. The space shall be provided with automatic fire sprinklers.

(4) Site.

(a) Roads and streets.

1. Site access shall consist of a primary road and an emergency means of access.

2. Stabilized wide shoulders of the primary road shall satisfy the requirement for emergency means of access if they are unobstructed by plantings, signs, light poles, or other obstructions.

(b)1. Fire fighting and other emergency equipment shall have free access to any part of the educational plant.

2. Fencing with gates wide enough to allow entry of fire fighting and emergency equipment is allowed.

(5) Doors and Windows.

(a) Doors

1. Egress and Exit Doors.

a. In buildings designed before October 18, 1994, egress doors and gates, regardless of use or location, shall swing in the direction of exit travel, except in rooms occupied by fewer than 20 persons.

b. In buildings designed on or after October 18, 1994, all rooms with an occupant load of 6 or more shall have doors which swing in the direction of exit travel.

c. Exit doors shall be operable from the inside at all times without the use of special keys, tools, or equipment.

2. Doors shall be readily opened from the side from which egress is to be made.

3. Single egress doors shall be a minimum of 28 inches in width and a minimum of 6 feet 8 inches in height. Doorways providing access and egress for the physically disabled shall be a minimum of 32 inches in width and a minimum of 6 feet 8 inches in height.

4. Doors opening into interior corridors shall be either:

a. Recessed and hinged to swing 90 degrees; or

b. Not recessed and hinged to swing 180 degrees.

5. The force to open doors shall be in accordance with Chapter 7 of NFPA 101.

6. Doors used as a secondary means of egress shall:

a. Be accessible;

b. Be operable from the side of egress;

c. Be free of blockage by any materials that may interfere with its use; and

d. Have a readily visible sign adjacent to the opening in letters not less than 1 inch high on a contrasting background that reads "EMERGENCY ESCAPE".

7. Fire-Rated Doors. Fire-rated doors, frames, and hardware in corridors, stairwells, and other required means of egress shall be labeled with permanently affixed, legible labels located on the door and frame.

8. When a pair of fire-rated doors is located within a corridor, they shall:

a. Swing in the direction of egress and have a fixed center jamb; or

b. Be equipped with a coordinator and an overlapping astragal.

9. Glazing in fire-rated doors shall be equivalent to fire-rated glazing or wire glass set in a steel frame.

10.a. Carpet shall not extend through fire-rated doorways and shall be separated by a non-combustible threshold.

b. Class I or II carpet may be run under 20 minute, Class C or Class B labeled door assemblies.

c. Carpet shall not be installed under a Class A labeled door assembly and shall be separated by a non-combustible threshold.

11. Fire-rated doors shall be self-closing and equipped with positive latching devices to hold them in a closed position.

12. Fire-rated doors, when provided with approved electro-magnetic hold-open devices, shall release the door within 10 seconds upon activation of the fire alarm or smoke detection system.

13. Smoke Stop Doors.

a. Smoke stop doors shall be 1 3/4 inch solid core wood, or equivalent.

b. Smoke stop doors may be used:

(I) To create a secondary means of egress from interior instructional spaces; or

(II) To divide corridors into segments not to exceed 300 feet in aggregate length.

c. View panels of clear fire-rated glazing (including wire glass) mounted in steel frames shall be permitted in smoke stop doors.

d. When a pair of smoke stop doors is located within a corridor, each leaf shall be designed to swing in a direction opposite from the other and each leaf in the pair of doors shall swing in a right-hand direction.

e. Smoke stop doors shall have a head, jamb, and sill clearance of not more than 1/8 inch and shall be free of grills or louvers.

f. Door stops shall be provided at the head and sides of door frames.

g. Door frames shall be free of center mullions.

h. Smoke stop doors shall be free of locking devices.

i. When held in the open position, the doors shall release within 10 seconds upon activation of the smoke detectors or fire alarm system.

j. Smoke detectors used to activate the release of smoke stop doors shall be installed in accordance with NFPA 72, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

k. Smoke stop doors shall be held in the open position by electro-magnetic devices which release the doors when smoke detectors activate the fire alarm system.

l. When smoke stop doors are held open by smoke detectors, at least 1 detector shall be installed on each side of the door opening.

m. The free edge of all smoke stop doors, when in an open position, shall be protected so that the doors cannot be accidentally closed by hand.

14. Smoke stop barriers (walls and partitions) for compartmentalization shall be continuous from wall to wall and from the floor through any concealed space in a corridor, such as a suspended non-rated ceiling, to the floor or roof deck above.

15. Special Function Doors. Special function doors shall not be used as a means of egress, and shall comply with NFPA 101 and the following:

a. Revolving Doors. Revolving doors shall:

(I) Have a side-hinged exit door within 10 feet and within the same wall; or

(II) Have an emergency break-away feature.

b. Turnstiles. When used, turnstiles shall:

(I) Be placed to allow free access through a means of egress; or

(II) Have an emergency break-away feature.

c. Folding Doors and Folding Partitions. Where permanently mounted folding or movable partitions are used to divide a room into smaller spaces containing 10 or more persons, or 6 or more persons in buildings designed on or after October 18, 1994, a separate exit from each space or a permanent full height 5 foot wide opening between the spaces shall be provided.

d. Shutters and Roll-Up Doors.

(I) Fire-resistance rated shutters, and roll-up doors in fire-resistance rated walls, shall be equipped with fusible links and an automatic self-closing device.

(II) In buildings designed on or after October 18, 1994, these doors shall be also equipped with a bottom sensing edge that will stop and reverse the door's travel when meeting an obstruction.

e. Overhead Doors. These doors, whether manual or power operated, shall be in good repair and operate as intended.

f. Power Operated Doors. When used, these doors shall be equipped with a manual opening device for use in the event of a power failure.

g. Darkroom Doors.

(I) In darkrooms with a capacity of 10 or more persons, a revolving darkroom door, if used, shall:

(A) Have a pop-out safety feature; and

(B) Be equipped with a remotely located side-hinged door for secondary egress.

(II) In darkrooms with a capacity of fewer than 10 people, a revolving darkroom door with a pop-out safety feature may be used as the primary means of egress.

(III) Revolving darkroom doors with a pop-out safety feature shall be conspicuously labeled.

(IV) In buildings designed on or after October 18, 1994, the requirements of this section apply to darkrooms with an occupancy of 6 or more.

h. Overhead and Sliding Security Grills. Security grills shall remain secured in the fully open position when the building is occupied.

i. Gates. Gates used to secure buildings or used for egress shall be side-hinged and readily opened at all times from the side from which egress is to be made.

j. Screen and Storm Doors. Screen and storm doors on exits shall be hinged on the same side as the exit door and swing in the direction of exit travel.

k. Vault Doors. Vault doors shall be equipped with emergency release hardware to allow egress from the inside at all times.

(b) Hardware.

1.a. Doors and gates shall be equipped with hardware which allows egress at all times without assistance.

b. Projecting hardware on doors swinging into a means of egress is not considered an obstruction if the door opens flat against the wall.

2. Unsafe Locking Devices. All doors shall be free of any padlock, chain, hasp, lock, deadbolt, or other device which would prevent free use of the door for egress at any time.

3. Special Function Door Locking Devices. Special function doors in a path of egress shall be equipped with emergency release hardware to allow egress from the inside at all times.

4. Panic Hardware. Panic release hardware shall be installed on exit doors serving spaces containing 100 or more persons.

5. Self-closing doors. Fire-rated doors and solid core doors in 1/2 hour or smoketight partitions shall be self-closing doors.

6. Door Stops. Interior fire-rated self-closing doors shall be free of any manual hold-open devices such as door stops, wedges, or other devices.

7. Locksets. All required exit doors shall be equipped with locksets which are not lockable from inside the space. EXCEPTION: The Classroom Security Function that allows the outside lever to be locked with a key from either the inside or outside, while keeping the inside lever unlocked for unrestricted egress may be used.

8. Electro-Magnetic Hold-Open Devices. Approved devices which release the door upon activation of the fire alarm system, approved automatic sprinkler system, heat detector, or smoke detector shall be installed on smoke stop doors, and may be installed on fire-rated doors.

9. Security Hardware and Alarms. Door opening delay devices shall not be installed on egress and exit doors unless they are installed in such a manner that they will release instantly upon activation of the building fire alarm system and meet all of the other requirements of NFPA 101-7.2.1.6.

10. Doors may contain alarms that sound when the door is opened.

(c) Glazing shall:

1. Be secured on all sides;

2. Be free of any loose or broken pieces;

3. Be in good repair; and

4. Comply with the following:

a. Fire-Rated Glazing. Fire-rated glazing material shall have a permanent stamp, mark, or manufacturer's label identifying the product and fire rating.

b. Hazardous locations shall be glazed with:

(I) Safety plastic;

(II) Tempered glass;

(A) Safety glass; or

(B) In fire-rated assemblies, impact-resistant fire-rated glazing material.

(III) Wire glass and fire-rated glazing shall be installed in fire-rated and smoke stop doors set in steel frames.

(IV) (A) Glazed panels in 1 hour and 1/2 hour fire-resistance rated walls and partitions shall be limited to either:

(i) 1/4 inch thick wired glass or 1/4 inch thick fire rated glazing material installed in steel frames; or

(ii) Labeled glass block panels installed in steel channels.

(B) Glazed panel sizes shall be as follows:

(i) The glazing shall be 1296 square inches or less, with no dimension greater than 54 inches.

(ii) The glass block shall be 120 square feet or less with no dimension greater than 12 feet.

(iii) The glazing or block shall be not more than 25 percent of the wall area containing the glazing or block as viewed from inside the space.

(V) Areas of exterior glazing shall be maintained in a safe and secure manner and shall be free of loose or broken pieces of glass.

(d) Windows. Windows used for emergency access, emergency rescue, and secondary means of egress shall be maintained in an operable, safe, and secure condition and shall be free of any loose or broken pieces of glass.

(e) Emergency Access Openings.

1. Exterior walls accessible to emergency vehicles shall have emergency access openings every 50 lineal feet around the perimeter of the building on each floor level.

2. In buildings equipped with an approved automatic sprinkler system, emergency access openings shall be spaced not more than 200 lineal feet apart.

3. Where a large single use space, such as a gym, has doors or windows leading directly to the exterior, emergency access openings are not required.

4. The openings shall be a minimum of 28 inches wide by 42 inches in height, with the bottom of the opening not more than 44 inches above finished grade.

(f) Emergency Rescue Openings (Secondary Means of Egress).

1. In non-sprinklered buildings, every instructional space, and other spaces normally subject to student occupancy of 10 or more, shall have at least 1 window, panel, or door leading to the exterior or to a separate atmosphere.

2. For buildings designed after October 18, 1994, the emergency rescue opening shall be provided in rooms over 250 square feet used for classroom or other educational purposes or normally subject to student occupancy of 6 or more.

3. Secondary means of egress and emergency rescue openings shall be identified by permanently mounted signs indicating either "EMERGENCY ESCAPE" or "EMERGENCY RESCUE - KEEP AREA CLEAR."

4. Secondary means of egress or emergency rescue openings shall be provided by one of the following:

a. A window or panel.

(I) The window or panel shall have a clear opening a minimum of 20 inches wide by 24 inches in height, and 5.7 square feet in area, with the bottom of the opening not more than 44 inches above the finished floor; or

(II) Windows and panels shall be operable from the inside by a single operation and without the use of tools.

(III) The window or panel latching device shall be mounted not more than 54 inches above the finished floor; or

(IV) If a security screen or grill is installed on a window or panel, it shall be operable from the inside by a single operation and without the use of tools. The release device shall be readily identifiable and accessible.

b. A side-hinged door a minimum of 28 inches wide and 6 feet eight inches tall opening directly to the exterior at ground level. Interior instructional spaces shall be provided with side-hinged or double acting communicating doors providing for secondary means of egress and emergency rescue complying with the following:

(I) The door shall be free of any locking device.

(II) The door shall provide direct access to:

(A) The exterior;

(B) A separated exit corridor;

(C) A separate atmosphere; or

(D) At least one enclosed exit stair.

(III) The maximum travel distance from the instructional space to the exterior shall be not more than:

(A) 150 feet in an unsprinklered building; and

(B) 200 feet in a sprinkled building.

c. An illuminated exit sign indicating the direction of exit travel shall be permanently mounted at the head of each side-hinged door.

d. A sign indicating "EMERGENCY ESCAPE" or "EMERGENCY EGRESS – KEEP AREA CLEAR" shall be mounted on each side of the double-acting communicating door.

e. The window or door shall be operable from the inside without the use of tools.

(6) Finishes.

(a) All interior finishes, contents, and furnishings shall comply with Chapter 10 of NFPA 101, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

(b) Any furnishings or decoration shall comply with NFPA 101, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

(c) Ceilings. Where a fire-rated ceiling is required, such as in corridors, means of egress, and stairs, a fire-rated solid type ceiling or a fire-rated suspended lay-in type ceiling shall be used.

(d) Walls.

1. A fire-resistant rated wall shall:

a. Be continuous from the floor to the floor or roof deck above; or

b. Terminate at a fire-rated deck below the roof deck or floor deck above.

2. Fire walls shall extend from the foundation through the roof.

(e) Floors.

1.a. Carpet installed under a fire-rated door shall be separated by a flat non-combustible threshold.

b. Class I and Class II carpet may run continuously through all openings except Class A (3-hour) fire-rated openings

2. The original carpet certification shall be on file and shall be available for inspection.

(7) Specialties.

(a) Signage.

1. Interior Signage. Permanent and temporary interior signage shall be uniform in color, height, size, and graphics. Interior signage and graphics shall include the following:

a. Emergency rescue openings: "EMERGENCY RESCUE – KEEP AREA CLEAR."

b. Secondary means of egress/emergency egress openings: "EMERGENCY ESCAPE" or "EMERGENCY EGRESS – KEEP AREA CLEAR."

2. Occupant capacity signs shall be mounted adjacent to the main entrance door in each instructional and assembly space with a capacity of 50 or more persons. Each sign shall legibly state as a minimum:

"OCCUPANCY BY MORE THAN _____ PERSONS IS
DANGEROUS AND UNLAWFUL. /S/

FIRE OFFICIAL:

DATE."

3. Room numbers and names shall be provided for each space.

4. Illuminated exit and directional signs shall be provided.

5. Exit signage shall clearly identify egress paths from each classroom.

6. Signs shall indicate accessible access routes, entrances, and rooms within a building.

7.a. Except when an exit door from a self-contained classroom opens directly to the exterior, a graphic diagram of primary and secondary evacuation routes shall be posted adjacent to the primary exit door from each student-occupied space.

b. The diagram shall clearly indicate, by contrasting color and number, the primary and secondary route of evacuation.

8. In educational facilities that house pre-kindergarten through grade 3, including auxiliary spaces used by these students, signage shall be mounted at a maximum height of 42 inches above finished floor on the wall adjacent to the latch side of the door.

(b) Equipment. Equipment shall meet the following minimum requirements for safety, and operational features, including relocatable buildings, as applicable: Portable fire extinguishers shall be required in all storage and mechanical spaces and spaces designated for occupancy in accordance with NFPA 10, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

(c) Fire extinguishers may be located inside student-occupied spaces provided:

1. The fire extinguisher is located adjacent to the primary exit door;

2. The door remains unlocked when the facility is occupied; and

3. A permanently affixed sign, with a red background and white letters reading "FIRE EXTINGUISHER INSIDE" is placed adjacent to the door outside the room where the fire extinguisher is located.

(d) Fire blankets shall be located in each laboratory, shop, kitchen, or other area where a personal fire hazard exists.

(e) Fire Protection Cabinets. Fire hose, fire blanket, and fire extinguisher cabinets shall have glazed panels of tempered glass, safety glass, or safety plastic.

EXCEPTION: At lockable Fire Protection Cabinets glazing shall be tempered glass only.

(f) Incinerators.

1. Existing on-site incinerators and waste burners shall be equipped with a wire screen stack guard and shall be used for burning Class A materials only.

2. Incinerators shall be maintained in a safe and secure condition at all times.

(g) Residential Appliances. Residential-type appliances, such as stoves, hoods, refrigerators, washers, dryers, ovens, and unit kitchens when used in classrooms, labs, lounges, and shops, shall be maintained in a safe and secure condition at all times.

(8) Furnishings.

(a) Furnishings shall meet the following minimum safety requirements for furnishings and decorations, including furnishings used in relocatable buildings:

1. Hazardous Materials. Educational and ancillary plants shall be free of furnishings and decorations made of explosive, highly flammable, or toxic materials.

2. Means of Egress. Means of egress (corridors, exit doors, etc.) shall be free of any furnishings, decorations, or other objects which would obstruct egress.

3. Concealed Exits. Exit doors shall be free of any hangings, drapery, or mirrors which may confuse, obstruct, or conceal the exit or the direction of exit.

4. Window Coverings. Materials used for window coverings, black-out curtains, and stage curtains shall be labeled to indicate that they comply with flame resistant requirements.

5. Classroom and Office Furniture. Exits shall be free of any classroom or office furniture which would impede access through a means of egress.

6. Floor Mats and Grates. Exits and means of egress shall be free of any obstructions caused by floor mats and grates.

(b) Auditorium and Theater Seating. Auditorium and theater fixed and movable seats shall be accessible and maintained in a safe and operational condition at all times.

(c) Interior Plants and Planters.

1. Exits and means of egress shall be free of any obstruction caused by interior planters and plants.

2. Artificial plants and plastic or wood planters shall be flame resistant.

(9) Special Construction.

(a) Ancillary plants, such as central administration buildings, warehouses, and bus garages, shall comply as follows with the existing occupancy section in NFPA 101 for the type of occupancy.

(b) Assembly Spaces.

1. Inspection of assembly occupancies shall include the adjacent and related spaces associated with the main seating area such as stages, dressing rooms, storage, lobby, public restrooms, kitchens, and work rooms.

2. A permanently affixed sign in each assembly space, adjacent to the primary entrance, shall state the actual capacity of the space.

3. Exits from assembly occupancies shall lead directly to the exterior or to separate atmospheres which then lead directly to the exterior, as required by NFPA 101.

4. Seating.

a. In places of assembly accommodating more than 200 persons, seats shall be securely fastened to the floor, except when seats are fastened together in groups of not fewer than 3 nor more than 7.

b. EXCEPTION: In cafeterias, gymnasiums, lunchrooms, or other assembly areas where fastening of seats to the floor may be impractical, seats not secured to the floor are permitted, provided that in the area used for seating, excluding stage and storage:

(I) There shall be at least 10 square feet of net floor area per seat, and

(II) The aisles to reach exits shall be clear at all times.

5. All seats in balconies and galleries shall be securely fastened to the floor.

6. Fixed seats shall be maintained in accordance with NFPA 101.

7. When continental seating is used, there shall be not more than 100 seats in any one row between aisles.

8. In assembly spaces with continental seating, exit doors shall:

a. Be maintained in operable condition along each side aisle, and

b. Discharge to the exterior of the building, or into a foyer or lobby.

9. Aisles Serving Seating.

a. Every portion of any assembly occupancy that contains a theater or similar type seating facility shall be provided with aisles leading to exits.

b.(I) The width of aisles shall be at least 36 inches of clear unobstructed space.

(II) Aisle steps and ramps shall be maintained in a safe and secure condition at all times.

(III) When lighting is provided, lamps shall be clean and in good working condition.

c. A contrasting marking stripe shall be provided on each tread at the nosing or leading edge so that the location of the tread is readily apparent, particularly when viewed in descent, and shall be in compliance with NFPA 101.

10. Aisles Serving Seating at Tables.

a. Fixed or loose chairs, tables, and similar furnishings or equipment shall be arranged and maintained such that a path of travel to an aisle or exit is provided.

b. Rectangular tables used for dining, or purposes having similar seating configurations where the path of travel to an aisle exceeds 10 feet, shall be spaced:

(I) 54 inches or more apart where seating occurs back-to-back; and

(II) 36 inches or more where seating is on one side only.

(III) The path of travel to an aisle or exit shall not exceed 20 feet.

(IV) When loose seating occurs bordering on the aisle, a 36 inch aisle shall be provided plus:

(A) An additional 19 inches for a chair on one side of the aisle; or

(B) An additional 38 inches for chairs on both sides of the aisle.

11. Aisles Serving Bleachers and Grandstands.

a. When bleacher and grandstand seating is provided, including fixed, folding, and telescopic seats, vertical aisles shall be provided.

b. Seating without backs shall require aisles only when such seating is more than 11 rows high.

c. Vertical aisles, where provided in bleachers and grandstands, shall be free of any dead end in excess of 16 rows.

12. Railings.

a. The fascia/front wall of boxes, balconies, and galleries shall be:

(I) At least 26 inches above the adjacent floor; or

(II) Have substantial railings at least 26 inches above the adjacent floor.

b. Ramped aisles and aisle steps shall be provided with handrails at least 30 inches high at one side or along the centerline.

c. Railings at the bottom end of ramped aisles shall be at least:

(I) 36 high for the full width of the aisle; and

(II) 42 inches high for the width of the aisle where steps occur.

d. Cross aisles shall be provided with railings at least 26 inches above the adjacent floor.

e. Railings are not required where the backs of seats on the front of the aisle project 24 inches or more above the adjacent floor of the aisle.

f. Railings at least 42 inches high shall be provided at the top and sides of bleachers and grandstands.

13. Waiting Spaces in auditoriums and similar places of public assembly where persons are admitted to the building and are allowed to wait in a lobby or similar space until seats are available, the required means of egress and exiting shall remain clear and unobstructed.

(c) Auxiliary Spaces. Auxiliary spaces within an educational plant, such as administrative suites, libraries, and food service areas, shall be considered as a mixed occupancy and shall be included in the annual fire inspections of existing facilities.

(d) Boiler Rooms.

1.a. Boiler room walls, floors, and ceilings shall be of solid construction and shall be equipped with heat detectors connected to the fire alarm system.

b. Boilers shall comply with Chapter 554, Florida Statutes, and Rule Chapter 4A-51, Florida Administrative Code.

2. The door shall open directly to the outside and, if opening toward a building or path of egress, shall have a fire-rating label.

3. If an additional door opens into the interior of the building, the door shall swing into the boiler room and have a fire-rating label.

4. Boiler rooms shall be free of any equipment or materials not required for operation of the boiler.

5. A valid boiler inspection certificate of compliance shall be displayed and clearly visible.

(e) Child Care Child care/day care facilities located on board-owned property shall comply with the requirements of Chapter 402, Florida Statutes and the specific requirements as follows:

1. Construction Requirements.

a. A residential-type kitchen, when provided, shall include:

(I) A residential-type range hood vented to the outside, and

(II) A fire extinguisher located within 15 feet of the range and within the same room.

b. Areas designated for children's sleeping mats, cots, or cribs shall include a clearly marked exit passageway.

2. EXCEPTION: Child care/day care facilities requiring a Department of Health or Department of Children and Family license shall also be required to comply with local building codes and other agency construction requirements.

(f) Community Colleges Community college facilities and buildings shall comply with the following:

1. Existing dormitories on college property shall comply with Chapters 28 and 29 of NFPA 101.

2. Existing dormitories not located on college property that are provided by private individuals, corporations, and foundations shall comply with the requirements of NFPA 101

(g) Grandstands and Bleachers.

1.a. Annual inspections shall be performed by board staff, and

b. Biennial inspections shall be performed by a structural engineer in accordance with these requirements and NFPA 102 Grandstands and Bleachers the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

2. A Certificate of Inspection provided to the district by a structural engineer of all concrete, structural members, stadiums and bleachers, masonry, masonry veneers, metals, structural steel, and parking structures shall be on file in the district office, and shall be made available to the fire official upon request.

(h) High-Rise Buildings.

1. All existing structures and buildings over 4 stories or 45 feet in height shall be equipped with automatic fire sprinkler systems that shall be maintained in proper working condition at all times.

2. Buildings which are 3 stories or more, and were constructed after January 1, 1994 shall be equipped with fire sprinklers pursuant to Chapter 553.895, Florida Statutes.

(i) Kilns.

1. Kiln rooms and areas shall be provided with adequate exhaust to dispel emitted heat to the exterior.

2. Kilns shall be located away from paths of egress or exits.

3. Kilns shall be located in separate rooms when serving students through grade three.

4. Kiln rooms shall be provided with smoke/heat detectors.

(j) Kitchen and Food Service.

1. Range hoods, duct systems, grease removal devices, and automatic fire extinguishing equipment shall be provided in all food service kitchens and instructional kitchens utilizing full commercial-scale equipment, and shall be serviced regularly and maintained in a safe, secure, and operational condition at all times in accordance with NFPA 96.

2. When the automatic fire extinguishing systems are activated:

a. Kitchen ventilation and heating systems shall shut down;

b. Fuel valves shall close;

c. Electrical appliances shall de-energize; and

d. The school fire alarm shall activate.

3. Automatic fire extinguishing systems using dry or wet chemicals shall be serviced regularly and maintained in a safe, secure, and operational condition at all times.

4. EXCEPTION: Home Education Kitchens. A residential-type kitchen, when provided, shall include:

a. A residential-type range hood vented to the outside, and

b. A fire extinguisher located within 15 feet of the range and within the same

(k) Laboratories and Shops Laboratories and shops shall comply with the following:

1. Master Control Valves and Switches.

a. Master control valves or switches shall be provided in each laboratory type space and each shop type space that is equipped with unprotected gas cocks, compressed air valves, water service, and electric service that is easily accessible to students.

(I) Examples of laboratory type spaces are chemistry, physics, and home economics labs.

(II) Examples of shop type spaces are automobile, wood working, and welding shops.

b. Emergency shut-offs are not required for ordinary office machines, non-hazardous machines, and domestic sewing machines.

(I) The master control valves and switches shall be clearly labeled and located in a non-lockable space accessible at the instructor's station to allow for emergency cut-off of services.

(II) Valves shall be completely shut-off with a 1/4 turn.

c.(I) The master control valves and switches shall be in addition to the regular main gas supply cut-off.

(II) The main supply cut-off shall shut down upon activation of the fire alarm system.

2. Laboratory and shop spaces shall be provided with exhaust systems as follows:

a. Chemistry laboratories shall have:

(I) A high capacity emergency exhaust system;

(II) A source of positive ventilation; and

(III) Signs providing instructions permanently installed at the emergency exhaust system fan switch.

b.(I) Chemistry labs shall be provided with fume hoods.

(II) Fume hood supply fans shall automatically shut down when the emergency exhaust fan is turned on.

c. Woodworking areas shall have dust collectors and exhaust systems.

d. Welding shops shall have fume removal and exhaust systems.

3. Hazardous work and storage areas shall be identified by appropriate caution signs.

(I) Library and Media Centers. Turnstiles and book detectors placed at doorways shall allow unobstructed passage and exit from the space.

(m) Open Plan Schools.

1. An open plan building, or portion of a building, is a building subdivided into smaller areas by use of partial partitions, movable partitions, or movable furnishing, which by location and type makes it possible for persons in one area of the plan to be immediately aware of an emergency situation in any other area of the plan.

2. a. In open plan unsprinklered buildings or portions thereof, the maximum distance from any point to an exit shall be 150 feet.

b. In open plan sprinklered buildings or portions thereof, the maximum distance from any point to an exit shall be 200 feet.

3. Exiting shall comply with the following:

a. Each space occupied by more than 50 persons shall have 2 or more means of egress.

b. Open plan assembly areas shall have exits leading directly to the exterior and shall be separated from other required exits of the open plan.

(n) Paint Spray Booths and Rooms.

1. Paint spray booths and rooms shall be provided with fresh air intake and shall be vented to the outside.

2. Vents shall be filtered to permit paint particles, or toxic or obnoxious fumes, to be exhausted from the facility.

3. The exhaust shall be oriented away from occupied areas, parking lots, and other areas that may be adversely affected by the exhaust.

(o) Performing Arts Theaters and Auditoriums Serving the Public. Performing arts theaters and auditoriums, including the adjacent and related spaces associated with the main seating area such as stages, dressing rooms, storage, lobby, public restrooms, work rooms, and kitchens, shall be in compliance with NFPA 101.

(p) Public Shelters.

1. All emergency generators shall be tested under load conditions.

2. Fire alarms and emergency lights shall be inspected in accordance with NFPA 101.

(q) Relocatable Buildings. All relocatable buildings shall comply with the requirements of this rule chapter and the specific criteria below.

1. Local Agency Inspection Report.

a. An inspection report shall be provided from the local fire official indicating that they have inspected each relocatable building and have found that no serious life safety hazards exist which would preclude continued occupancy.

b. The letter identifying each relocatable building by district inventory identification nomenclature shall be conspicuously posted within the building.

2. Separation of Units.

a. Type V or Type VI (wood frame) relocatable buildings shall be separated from each other and any permanent buildings by 20 feet in each direction for any wall with unprotected openings, and 6 feet in each direction for walls rated at 1 hour to prevent the spread of fire.

b. Type IV (noncombustible) relocatable buildings shall be separated as required by the Florida Building Code.

c. Relocatable buildings shall be separated from each other and any permanent buildings by sufficient distance in each direction to prevent the spread of fire and to allow access by emergency vehicles, as determined jointly by the local fire fighting authority that services the site and district policy.

(I)(A) Relocatable buildings shall be located to allow access by emergency vehicles to at least one elevation of each building as approved by the local fire fighting authority that services the site.

(B) EXCEPTION: Emergency vehicle access may be achieved for a cluster of relocatables designed in accordance with the following. Vehicle access provided to within 150' of the entrance of the most remote relocatable unit and an independent fire alarm system with a manual pull station within 100' of each egress door provided the following conditions are met:

(i) Maximum conditioned gross area of the units in a cluster is 12,000 square feet.

(ii) Minimum separation between individual units is 20 feet.

(iii) Nearest permanent building or cluster is 60 feet.

(iv) Maximum of 20% unprotected opening between adjacent wall spaces.

(v) Minimum overhead open space within the perimeter of the cluster is 50 percent, and

(vi) Minimum setback for Type IV (non-combustible) relocatable buildings shall be as required by local zoning.

(II) Required fire lanes shall be provided with the inner edge of the roadway no closer than 10 feet and no farther than 30 feet from the building.

(III) Fire lanes shall be marked in accordance with subdivision 3-5.4 of NFPA 1, as adopted and modified in Rule 4A-60.003, Florida Administrative Code, and shall have a surface designed to accommodate fire apparatus with a minimum weight of 32 tons.

3. Doors in relocatable buildings shall be provided as follows:

a. Standard classroom units of Type V or Type VI (wood) construction shall have 2 remotely located doors opening directly to the outside.

b.(I) Multi-classroom units of Type IV (non-combustible) construction shall have a primary exit door and an emergency rescue opening in each space occupied by 10 or more students, or by 6 or more students for relocatable buildings designed after October 18, 1994.

(II) An emergency rescue opening is not required when a door opens directly to the outside.

c.(I) Interior and exterior doors shall be a minimum of 3 feet wide and 6 feet eight inches high.

(II) Exit doors shall swing in the direction of exit travel.

d. Hardware. Exit doors shall be equipped with:

(I) A lockset, which shall be readily opened from the side from which egress is to be made;

(II) A maximum 1/2 high threshold;

(III) Heavy duty hinges; and

(IV) A door closer.

(V) All exterior doors shall open onto a 5 feet by 5 feet platform which:

(A) Is level with the interior floor; and

(B) Connects with an accessible ramp or step equipped with handrails.

(VI) An accessible ramp need only be provided at 1 of the 2 required doors from a standard classroom unit.

e. Time-out rooms, when provided, shall be equipped with doors which allow egress at all times in the event of an emergency.

4. Windows. Classroom units shall have operable windows in at least one wall equal to at least 5 percent of the floor area of the classroom.

5. Emergency Rescue.

a. Each multi-classroom unit of Type IV (non-combustible) construction shall have an operable single-action window available for emergency rescue from each classroom or student occupied space.

b. The window shall be openable from the inside without the use of tools, and shall provide a clear opening of not less than 20 inches (51 cm) in width, 24 inches (61 cm) in height, and 5.7 square feet (0.53 sq. m) in area.

c. The bottom of the window shall be not more than 44 inches (112 cm) above the floor, and any latching device shall be capable of being operated from not more than 54 inches (137 cm) above the finished floor.

6. A residential-type kitchen provided in relocatable buildings shall include:

a. A residential range hood vented to the outside; and

b. A fire extinguisher located within 10 feet of the range.

7. At least one 2-A fire extinguisher of an approved type shall be provided in each standard relocatable building and in each classroom of a multi-classroom unit, and shall be maintained in accordance with NFPA 10, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

8. Electrical. Electrical systems shall be checked for damage, and shall operate properly. Required life safety and emergency systems shall have been tested and shall operate properly in accordance with the applicable standards of this rule chapter.

a. Emergency Lighting. Each classroom and spaces used for student occupancy and group toilet rooms shall be equipped with emergency lighting.

b. Fire Alarm Systems.

(I) Fire alarm systems shall be installed and inspected as required by NFPA 72, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

(II) Each relocatable building, other student use spaces, and each multi-classroom unit shall be provided with approved fire alarm devices meeting the requirements for existing educational buildings as required by this rule chapter.

(III) The fire alarm in the permanent facility shall be audible from inside any relocatable building located within 200 feet of a permanent building.

(IV) Relocatable buildings shall be sited for access to a manual pull station within 200 feet.

(V) Heat and Smoke Detectors in Wood Construction. In Type V and Type VI (wood) construction, heat or smoke detectors connected to the building's fire alarms system shall be installed in every classroom, unsupervised space, storage space, and custodial closet.

(VI) Heat and Smoke Detectors in Non-Combustible Construction. In Type IV (non-combustible) construction, heat or smoke detectors connected to the buildings fire alarm system shall be installed in storage and custodial closets.

9. Child Care/TAP.

a. Standard classroom units of Type VI (wood) construction housing birth to age 3 children, including Teenage Parent Programs (TAP), shall be less than 2000 gross square feet, and shall comply with additional safety requirements outlined in this section.

b. If a residential-type kitchen is provided in these units, it shall include a residential range hood mechanically exhausted to the outside and a fire extinguisher located within 10 feet of the range.

10. Abandoned or Warehoused Facilities.

a. Board facilities no longer in use which are abandoned, or in storage but still owned, shall be free of combustible waste and secured in such a manner as to prevent safety hazards, unlawful entry, and undue vandalism.

b. Abandoned or stored facilities returned to use shall be inspected and certified as meeting the standards for existing "satisfactory" relocatable buildings prior to occupancy.

(r) Shade Houses or Green Houses shall comply with the general requirements of Chapter 11 of NFPA 101 and the specific requirements of this section.

1. Shade or greenhouses shall be located as follows:

a. With no fuel fired heaters, a minimum of 60 feet from all surrounding permanent buildings.

b. With fuel fired heaters, a minimum of 100 feet from all surrounding permanent buildings.

2. Shade or green houses shall be separated from other shade or green houses by a minimum of 15 feet.

3.a. A minimum of 2 remotely located doors shall be provided.

b. Doors shall be side hinged and shall swing in the direction of egress from the shade or greenhouse.

4. A minimum of one accessible walkway shall be provided inside the shade or greenhouse.

5. The exterior siding shall consist of breakaway type panels constructed of material other than glass, such as tear-away fabric, which is securely fastened to the structural frame.

6. A minimum of one type 2-A fire extinguisher, in accordance with NFPA 10 Portable Fire Extinguishers, the edition as adopted in Rule 4A-3.012, Florida Administrative Code, shall be provided for each 3000 square feet of space in each shade or greenhouse.

7. Fire alarm pull stations shall be located within 200 feet of any shade or greenhouse.

8. Fire alarm horns shall be mounted on a permanent building and shall be audible inside the shade or greenhouse.

9. Space heaters, when provided, shall be mounted at least 6 feet, 8 inches above finished floor.

(s) Stadiums and Bleachers. Stadiums, grandstands, bleachers, and other places of assembly shall comply with the life safety requirements of NFPA 101.

(t) Stages.

1. Working stages, non-working stages, platforms, and thrust stages, including props and equipment, in grades pre-kindergarten through 12 and community college educational facilities shall conform to the fire protection and general requirements of NFPA 101 and the specific requirements of this section.

2. General requirements for all stages:

a. All curtains and flies on stages shall have attached labels verifying their flame resistance.

b. Scenery or stage props shall be free of any foam plastics.

c. All working stages shall comply with the following:

(I) Stage vent(s) shall be operable from the stage floor and provide for both opening and closing the vent doors for periodic testing.

(II) The testing controls shall be located on the back wall of the stage no more than 6 feet above finished floor.

(III) Hand winches may be employed to facilitate manual operation of the vents.

d. The proscenium opening of a stage shall be provided with a fire curtain maintained in operable condition at all times.

e. The fire curtain shall be capable of manual operation and the proscenium curtain shall be kept in the normally closed position at the conclusion of each day's performances.

f. Each stage shall have at least 1 exit on each side leading directly to the exterior or to a protected corridor.

g. Stages over 1,000 square feet:

(I) Shall be fully sprinklered;

(II) Shall have at least:

(A) Two means of egress leading to separate atmospheres, available from every dressing room; and

(B) One means of egress from fly galleries.

(III) EXCEPTION: Fire sprinklers are not required if:

(A) The stage is less than 1000 square feet; and

(B) The stage curtains and scenery retract horizontally.

h. All combustible or flammable paint, liquids, or gases used in workshops shall be stored in a safe, secure, and orderly condition at all times.

i. Standpipes located on each side of the stage shall be readily accessible and kept operational at all times.

j.(I) Curtains, flies, drops, scenery or other effects on a non-working stage shall be stationary and allow for exiting from the stage at all times.

(II) A retractable main curtain may be used.

k. The space between the floor and the stage of a platform above shall be free of storage or any use other than electrical wiring or plumbing to stage equipment.

(u) Storage.

1. The areas above or below exit stairs and ramps, whether interior or exterior, shall be free of any storage rooms or closets and shall not be used for storage of any kind.

2. General storage areas shall be kept separated from mechanical spaces and shall be equipped with shelving, racks, bins, or other devices necessary to protect the stored materials, supplies, equipment, and books.

3. Chemical and hazardous storage areas shall comply with the following:

a. Rooms and cabinets used for the storage, handling, and disposal of chemicals shall:

(I) Be lockable;

(II) Be vented to the exterior; and

(III) Have shelves with a 1/2 inch lip on the front.

b. Door locks shall be operable at all times from the inside of the room, even if key locked from the outside.

c. Rooms shall be:

(I) Kept at the manufacturer's recommended temperatures for the materials stored therein; and

(II) Well illuminated.

d. Buildings and rooms used for the storage, handling, and disposal of flammable, poisonous, or hazardous materials or liquids; and equipment powered by internal combustion engines and their fuels, shall be kept in a safe, secure, and orderly condition at all times and shall comply with NFPA 101.

4. Explosion-proof heat detectors, electrical fixtures, switches, and outlets in flammable storage rooms shall be maintained in an operational condition at all times.

5. Custodial Work Areas and Storage spaces shall be in accordance with Section 15.3 of NFPA 101.

(v) Time-Out Rooms.

1. Time-out rooms, when provided, shall be equipped with doors which allow egress at all times in the event of an emergency.

2. Locking devices on time-out rooms are prohibited.

(w) Walk-In Coolers and Freezers.

1. Walk-in cooler and freezer doors shall be operable from the inside at all times.

(10) Mechanical. Mechanical systems shall meet the following minimum safety requirements for ventilation and building service equipment, including systems in relocatable buildings, as applicable:

(a) Ventilation. All occupied rooms and other rooms where odors or contaminants are generated shall be provided with either natural or mechanical ventilation.

1. Windows, louvers, or other openings utilized for natural ventilation shall be maintained in operable condition at all times.

2. Mechanical ventilation systems shall be maintained in an operable condition at all times.

(b) Building Service Equipment.

1. Mechanical equipment rooms and air-handler rooms shall be free of any type of storage.

2.a. Air-handling equipment (air-conditioning and heating) shall immediately shut down upon activation of the building fire alarm system by any manual or automatic station.

b. EXCEPTION: Air-conditioning equipment serving a single student-occupied space with a capacity of fewer than 50, including any related adjunct office, storeroom, or individual toilet room, need not be shut down upon activation of the building fire alarm system by any manual or automatic station.

3. Smoke detection devices shall be installed in the supply and return systems of air handling equipment.

EXCEPTION: Smoke detection devices need not be installed in supply and return systems of air handling equipment serving a single student-occupied space of a capacity of fewer than 50, including any related adjunct office, storeroom, or individual toilet room.

(c) Fire Sprinklers.

1. Each automatic fire sprinkler system, when provided, shall be installed and maintained in an operable condition at all times in accordance with NFPA 13, and NFPA 25, the editions as adopted in Rule 4A-3.012, Florida Administrative Code, and shall provide complete coverage for all portions of the areas to be protected.

2. The area within 18 inches of a sprinkler head shall be free and unobstructed by storage, equipment, or any device which might reduce the effectiveness of the sprinkler head.

3. Required periodic system test results and inspection reports shall be maintained in the administrator's office.

(11) Electrical. Electrical systems shall meet the following minimum safety requirements for illumination, fire alarms and detection systems, including electric system in relocatable buildings, as applicable.

(a)1. Illumination of Means of Egress.

a. Illumination of means of egress shall be continuous during building occupancy.

b. Lighting fixtures shall be maintained to provide the minimum required foot candles in accordance with Section 7.8 for every building and structure where required in Chapters 11 through 41, NFPA 101.

2.a. Means of egress shall be illuminated at all points, including angles and intersections of corridors and passageways, stairways, landings of stairs, and exit doors to average values of not less than 1 foot-candle measured at the floor.

b. In auditoriums and other places of assembly, the illumination at the floors of exit access may be reduced as required during performances to average values of not less than 1/5 foot-candle.

c. Illumination shall be maintained so that the failure of any single lighting unit, such as the failure of an electric bulb, will not leave any area in darkness.

(b) Emergency Lighting.

1. Emergency lighting maintained in an operational condition at all times shall be provided in all student-occupied areas and group toilets.

2. All externally or internally illuminated exit signs shall be continuously illuminated in the general or emergency power mode.

(c) Emergency Power. The emergency power source shall be maintained in an operational condition at all times and shall activate within 10 seconds of primary power failure.

(d) Fire Alarms and Heat/Smoke Detectors.

Fire alarms and heat or smoke detectors shall be maintained in an operational condition at all times and shall comply with the following:

1. A switch for silencing the alarm signal sounding equipment shall be provided only if it:

a. Is key-operated or in a locked cabinet;

b. Transfers the alarm indication to a lamp or other visual signal on the display panel; and

c. Allows subsequent alarm signals.

2. The fire alarm shall be capable of functioning independently of all other systems.

3. Manually operated sending stations maintained in an operable condition at all times shall be located:

a. Near all main exits; and

b. In the natural path of escape from fire at readily accessible and visible points, which points shall be free of any obstruction.

4. As authorized by NFPA 101, when facilities are provided with a 2-way communicating system between all normally-occupied spaces and a continuously manned location where a general alarm can be sounded, the manual sending stations may be omitted; except in spaces with a capacity of 100 or more or in other spaces as required by the authority having jurisdiction, provided the following conditions are met:

a. The communication system shall be a two-way system with the capability of originating calls from any station.

b. Stations shall be located in all student-occupied areas.

c. The manned location shall be attended continuously while the building is occupied.

d. The communication system shall be connected to emergency power.

e. The system shall be tested periodically to assure proper operation.

5. The fire alarm system shall be free of any drill switches.

6. a. Sending stations located inside student-occupied spaces shall:

(I) Be adjacent to the primary exit door;

(II) Have a permanently affixed sign reading "FIRE ALARM PULL STATION INSIDE" placed outside that space, adjacent to the door.

b. The door to the occupied space shall be unlocked at all times the facility is occupied.

7. Required fire alarm system sounding devices shall be used for fire alarm purposes only.

a. The audible and visual alarm device shall be required in accordance with NFPA 101, the edition as adopted in Rule 4A-3.012, Florida Administrative Code.

b. Alarm sounding devices shall be distinctive in pitch and quality from all other sounding devices.

c. The recall signal shall be separate and distinct from, and cannot be mistaken for, any other signal.

d. The recall controls, push buttons, or other control shall be securely maintained at all times.

e. The recall system shall be:

(I) Capable of being heard in both the interior and exterior of all areas and buildings simultaneously; and

(II) Controlled from the central control panel for all areas and buildings.

f. The annunciator control panel shall be located in accordance with NFPA 101.

8.a. Activation of the fire alarm system shall be permitted to accomplish incidental functions such as:

(I) The release of self-closing doors. All doors in smoke and fire barriers, horizontal exits, and stairway enclosures shall be self-closing or release by a fail-safe door holder when activated by the alarm system.

(II) Elevator capture.

(III) Stairwell pressurization.

(IV) Smoke venting.

(V) Shutting off supplies of gas and fuel oil which may be hazardous or:

(A) Do not feed emergency power sources.

(B) Do not feed kitchen equipment, or

(c) Are not essential to preservation of life, and

(VI) Stopping air supply fans.

b. Elevator capture shall also be provided by smoke detector in elevator lobby.

c. Gas supply to the kitchen may not shut off upon activation of fire alarm.

(I) Kitchen hood fire-suppression systems shall shut down required cooking appliances under the hood.

(II) The gas supply to the hood shall be controlled by the hood fire-suppression system only.

9. Initial and back-up sources of emergency power shall be maintained and ready for operation at all times.

a. Back-up power shall be capable of operating the fire alarm system under maximum normal load for 24 hours and then operating in the alarm mode for 5 minutes.

b. The automatic transfer to back-up power shall occur within 10 seconds of power loss.

c. The backup source may be batteries or an automatic starting engine-driven generator.

10. Arrangements shall be made for notification of the public fire department or such other outside assistance as may be available in case of fire or other emergency.

11.a. Air-handling equipment (cooling and heating) shall immediately shut down upon activation of the building's fire alarm system by any manual or automatic station.

b. EXCEPTION: Air-conditioning equipment serving a single student-occupied space of capacity fewer than 50, including any related adjunct office, storeroom, or individual toilet room, need not be shut down upon activation of the building fire alarm system by any manual or automatic station.

12.a. Smoke detection devices shall be located in the supply and return systems of all air handling equipment.

b. EXCEPTION: Smoke detection devices need not be installed in supply and return systems of air-handling equipment serving a single student-occupied space of capacity fewer than 50, including any related adjunct office, storeroom, or individual toilet room.

c. Smoke detectors shall be maintained to operate reliably in case of smoke in any part of the air stream.

d. Smoke detectors shall be required only in the return systems for new construction.

e. Smoke detection devices are not required in 100 percent outside air supply ducts.

13.a. Rooms or spaces used for storage, custodial closets, spaces under stages with wood structures, and other unoccupied or unsupervised spaces in a building that have automatic fire or heat detection devices installed at the ceiling or these rooms shall be sprinklered, if they are in a fully sprinklered building.

b. Rooms for air handling equipment with detectors on supply and return air ducts which do not use the room for air plenums are exempt from this requirement.

14. Explosion-proof detectors shall be installed in flammable storage rooms.

15. The fire alarm system may be activated by any or all of the following methods:

- a. Activation of any automatic detector.
- b. Activation of the fire sprinkler system.
- c. Activation of an alarm manual pull station.
- d. Activation of a kitchen automatic fire extinguishing system.

16. Interference with or malfunction of any power or tamper switch or failure of any fire alarm system component shall illuminate a signal light on the fire alarm control panel.

17. Self-closing fire and smoke stop doors shall be maintained in an operational condition at all times and shall release upon activation of the fire alarm system or the smoke detectors located on each side of the door.

18. Reports and certificates

a. Required periodic system test results and inspection reports shall be maintained on the premises.

b. The current inspection certificate shall be on file and available for review.

(e) Power. Electrical wiring and equipment shall be maintained in a safe and secure condition at all times and shall comply with the following:

1. Electrical outlets:

a. All outlets shall be grounded.

b. A ground fault circuit interrupt protection device (GFCI) shall be provided for all convenience outlets installed within 2 feet (within 6 feet for new construction under the 1997 SREF or later) of:

(I) Water supplies.

(II) Wet locations.

(III) Toilet rooms, and

(IV) The exterior with direct grade level access.

c. The ground fault circuit interrupt protection device is not required for grounded receptacles serving only water coolers, if the receptacle is single or covered behind the water cooler enclosure.

d. Outdoor ground fault interrupter protected outlets shall be provided for all buildings.

e. Flammable storage rooms shall be free of electrical receptacles.

f.(I) Extension cords shall not:

(A) Be stapled to any surface, or

(B) Run through or over doors, windows, or walls.

(II) Extension cords shall be used only in continuous lengths and without splice or tape.

(III) Adapters shall:

(A) Be listed by Underwriters Laboratories (UL), and

(B) Be equipped with over-current protection with a total rating of no more than 15 amperes.

2. Lighting controls:

a. Electric panels, cabinets, and rooms shall be accessible only to authorized persons.

b. Main service panels and switches shall be located in a dedicated and lockable room.

c. Electrical rooms shall be free of any storage.

d. Unobstructed access shall be provided to all electrical panels.

3. Emergency Shut-Off Switches.

a. Every laboratory space which has electrical receptacles at student work stations shall have an unobstructed emergency shut-off switch within 15 feet of the instructor's work station.

b.(I) Every shop space which has power machinery accessible to students shall have 2 unobstructed emergency shut-off switches which shut off power to student accessible machines and student accessible receptacles in the shop.

(II) One emergency shut-off switch shall be located near the machinery and one emergency shut-off switch shall be located in a supervised location that provides a clear view of the entire shop area.

(III) Non-hazardous machines not requiring emergency shut-off include:

(A) Office machines.

(B) Computers.

(C) Sewing machines.

(D) Potter's wheels, and

(E) Residential cooking equipment in home economics labs.

c.(I) A "panic" switch to deactivate power to the heating equipment shall be provided inside sauna and steam room(s).

(II) The switch shall be labeled to indicate its intended function.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History--New

4A-58.009 Florida School Evaluation System.

(1) Any Florida school which was initially occupied prior to January 1, 1985, is permitted to use the Florida School Evaluation System dated September 19, 2000, and amended June 28, 2001, which is hereby adopted and incorporated by reference, in lieu of or as an alternative to the requirements of Rule 4A-58.008, Florida Administrative Code.

(2) The Florida School Evaluation System may be obtained by writing to the Division of State Fire Marshal, Bureau of Fire Prevention, 200 East Gaines Street, Tallahassee, Florida 32399-0342.

Specific Authority 235.06 FS. Law Implemented 235.06 FS. History--New

NAME OF PERSON ORIGINATING PROPOSED RULE:
Jim Goodloe, Chief, Bureau of Fire Prevention, 200 East Gaines Street, Tallahassee, Florida 32399-0340

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Randall A. Napoli, Director, Division of State Fire Marshal, Department of Insurance
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 21, 2002
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: June 28, 2002

DEPARTMENT OF TRANSPORTATION

RULE CHAPTER TITLE: Aggregate Source Approval
RULE CHAPTER NO.: 14-103
RULE TITLE: Source Approval Requirements
RULE NO.: 14-103.004

PURPOSE AND EFFECT: This proposed amendment is to remove subsection (6) and paragraph (6)(a) of Rule 14-103.004, F.A.C. There is insufficient statutory authority for the provisions outlined in this section. There are no proposed amendments to any of the other sections within the rule other than the renumbering of subsections (7) to (6).

SUMMARY: Rule 14-103.004, F.A.C. is being amended to remove subsection (6) relating to Fees and Costs. There are no proposed amendments to any of the other sections within the rule other than the renumbering of subsections (7) to (6).

SPECIFIC AUTHORITY: 334.044(2),(10)(c) FS.
LAW IMPLEMENTED: 334.044(10)(a),(b),(c),(13), 337.105(1), 337.11, 337.164 FS.

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

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

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

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

THE FULL TEXT OF THE PROPOSED RULE IS:

14-103.004 Source Approval Requirements.

(1) through (5)(e) No change.

~~(6) Fees and Costs.~~

~~(a) All producers for proposed out-of-country sources of mineral aggregate will be required to pay for the Department's actual transportation costs to and from the source location for the purpose of the initial inspection and evaluation of the source for source approval, as well as the annual inspection for out-of-country mines. This is to include air fare or Department~~

~~vehicle rental costs, if needed, and/or mileage rates if a Department vehicle is used. The producer will pre-pay transportation costs. Costs of meals and accommodations will be borne by the Department. Should multiple sources be evaluated for approval on the same trip, transportation costs will be applied proportionally.~~

~~(6)(7) Source Classifications.~~ These classifications are based on the Department's ability and resources. In circumstances that preclude the Department's ability to perform its QA function at the source, the Department reserves the right to change a source classification with a minimum of a month's notice given to the producer.

(a) through (b) No change.

Specific Authority 334.044(2),(10)(c) FS. Law Implemented 334.044(10)(a),(b),(c),(13), 337.105(1), 337.11, 337.164 FS. History--New 10-20-92, Amended.

NAME OF PERSON ORIGINATING PROPOSED RULE: John Shoucair, State Materials Office

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Ken Morefield, Assistant Secretary for Finance and Administration, for Thomas F. Barry, Jr., P.E. Secretary

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

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 2, 2002

PUBLIC SERVICE COMMISSION

DOCKET NO. 011351-EI

RULE TITLES: Continuity of Service
Annual Distribution Service Reliability Report
RULE NOS.: 25-6.044
25-6.0455

PURPOSE AND EFFECT: To revise electric reliability reporting requirements so that the Commission can better assess the reliability and quality of service provided.

SUMMARY: Revises the rules governing investor-owned electric utility continuity of service and the annual distribution service reliability report.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: The four largest utilities affected are anticipated to have minimal incremental transactional costs to comply with the rule. An exception from reporting certain information is provided for a small utility to reduce the additional cost imposed by the reporting requirements.

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: 366.05(l) FS.

LAW IMPLEMENTED: 366.03, 366.04(2)(c),(f),(5), 366.05(7) FS.

WRITTEN COMMENTS OR SUGGESTIONS ON THE PROPOSED RULE MAY BE SUBMITTED TO THE FPSC, DIVISION OF THE COMMISSION CLERK AND ADMINISTRATIVE SERVICES, WITHIN 21 DAYS OF THE DATE OF THIS NOTICE FOR INCLUSION IN THE RECORD OF THE PROCEEDING.

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

If any person decides to appeal any decision of the Commission with respect to any matter considered at the rulemaking hearing, if held, a record of the hearing is necessary. The appellant must ensure that a verbatim record, including testimony and evidence forming the basis of the appeal is made. The Commission usually makes a verbatim record of rulemaking hearings.

Any person requiring some accommodation at this hearing because of a physical impairment should call the Division of the Commission Clerk and Administrative Services, (850)413-6770, at least 48 hours prior to the hearing. Any person who is hearing or speech impaired should contact the Florida Public Service Commission by using the Florida Relay Service, which can be reached at 1(800)955-8771 (TDD).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Christiana T. Moore, Florida Public Service Commission, 2540 Shumard Oak Blvd., Tallahassee, Florida 32399-0862, (850)413-6245

THE FULL TEXT OF THE PROPOSED RULES IS:

25-6.044 Continuity of Service.

(1) Definitions applicable to this part:

(a) “Area of Service.” A geographic area where a utility provides retail electric service. An Area of Service can be the entire system, a district, or a region into which a utility divides its system. “Service Interruption.” An unplanned interruption of electric service greater than or equal to one minute due to a malfunction on the distribution system or a distribution-related outage caused by events on the utility’s side of customer meters which is triggered by load management restoration. The term does not include interruptions due to momentary circuit breaker operations, hurricanes, tornados, ice on lines, planned load management, or electrical disturbances on the generation or transmission system.

(b) “Average Duration of Outage Events (L-Bar).” The sum of each Outage Event Duration for all Outage Events occurring during a given time period, divided by the Number of Outage Events over the same time period within a specific Area of Service. “Customer Interruption Duration” (L). The time interval, in minutes, between the time when a utility first becomes aware of a service interruption and the time of restoration of service to a customer affected by that service interruption.

(c) “Customer Average Interruption Duration Index (CAIDI).” The average time to restore service to interrupted retail customers within a specified Area of Service over a given period of time. It is determined by dividing the sum of Customer Minutes of Interruption by the total number of Service Interruptions for the respective Area of Service. “System Interruption Time.” The total customer minutes of service interruption experienced on a utility’s system during a given time period, determined by summing the total minutes of Customer Interruption Duration for all interruptions during that time period. The total minutes of Customer Interruption Duration for an individual interruption is calculated by summing the Customer Interruption Duration for each customer affected by that individual interruption (estimated if actual data is not available).

(d) “Customers Experiencing More Than Five Interruptions (CEMI5).” The number of retail customers that sustain more than five Service Interruptions for a specified Area of Service over a given period of time. “Number of Service Interruptions (N).” The sum of service interruptions for the entire distribution system, or whichever portion of the distribution system which is being reviewed.

(e) “Customer Minutes of Interruption (CMI).” For a given Outage Event, CMI is the sum of each affected retail customer’s Service Interruption Duration. “Average length of a Service Interruption (L-Bar).” The time interval, in minutes, between the time when the utility first becomes aware of a service interruption and restoration of service to the last customer affected by that service interruption, summed for all service interruptions occurring during a given time period, and divided by the Number of Service Interruptions in the same time period.

(f) “Momentary Average Interruption Event Frequency Index (MAIFIE).” The average number of Momentary Interruption Events recorded on primary circuits for a specified Area of Service over a given period of time.

(g) “Momentary Interruption.” The complete loss of voltage for less than one minute. This does not include short duration phenomena causing waveform distortion.

(h) “Momentary Interruption Event.” One or more Momentary Interruptions recorded by the operation of a utility distribution interrupting device within a five minute period. For example, two or three operations of a primary circuit breaker within a five minute period that did not result in a Service Interruption is one Momentary Interruption Event.

(i) “Number of Customers Served (C).” The sum of all retail customers on the last day of a given time period within a specific Area of Service.

(j) “Number of Outage Events (N).” The sum of Outage Events for an Area of Service over a specified period of time.

(k) “Outage Event.” An occurrence that results in one or more individual retail customer Service Interruptions.

(l) “Outage Event Duration (L).” The time interval, in minutes, between the time when a utility first becomes aware of an Outage Event and the time of restoration of service to the last retail customer affected by that Outage Event.

(m) “Service Interruption.” The complete loss of voltage of at least one minute to a retail customer.

(n) “Service Interruption Duration.” The time interval, in minutes, between the time a utility first becomes aware of a Service Interruption and the time of restoration of service to that retail customer.

(o) “System Average Interruption Duration Index (SAIDI).” The average minutes of Service Interruption Duration per retail customer served within a specified Area of Service over a given period of time. It is determined by dividing the total Customer Minutes of Interruption by the total Number of Customers Served for the respective Area of Service.

(p) “System Average Interruption Frequency Index (SAIFI).” The average number of Service Interruptions per retail customer within a specified Area of Service over a given period of time. It is determined by dividing the sum of Service Interruptions by the total Number of Customers Served for the respective Area of Service.

(q) Planned Service Interruption.” A Service Interruption initiated by the utility to perform necessary scheduled activities, such as maintenance, infrastructure improvements, new construction due to customer growth. Customers are typically notified in advance of these events.

(2) Each utility shall keep a record of its system reliability and continuity of service data, customers’ Service Interruption notifications, and other data necessary for the reports filed under these rules. The utility shall record each Outage Event as planned or unplanned and shall identify the point of origination such as generation facility, transmission line, transmission substation equipment, or distribution equipment. The cause of each Outage event shall be determined and recorded in a standardized manner throughout the utility. The date and time of the Outage Event and the number of Service Interruptions for the Outage Event shall also be recorded ~~the cause of each Service Interruption, and shall categorize the cause as one or more of the following: lightning, tree or limb contacting line, animal, line downed by vehicle, dig in, substation outage, line transformer failure, salt spray on insulator, and corrosion, other, or unknown, and shall further identify whether the initiating event occurred on overhead or underground distribution lines.~~

(3) Each utility shall make all reasonable efforts to prevent interruptions of service and when such interruptions occur shall attempt to restore service within the shortest time practicable consistent with safety.

(4) When the service is necessarily interrupted or curtailed ~~for prolonged periods and for the purpose of working on the system,~~ it shall be done at a time which, when at all

practicable, will ~~result in cause~~ the least inconvenience to customers and all such scheduled interruptions shall be preceded by ~~reasonable adequate~~ notice whenever practicable to affected customers. Each utility shall maintain a current copy of its noticing procedures with the Division of Economic Regulation.

(5) The provisions of this rule shall not apply to a curtailment or an interruption of service to customers receiving service under interruptible rate classifications when the curtailment or interruption of service occurs pursuant to the affected retail customer’s service agreement.

Specific Authority 366.05(1) FS. Law Implemented 366.03, 366.04(2)(c),(5), 366.05 FS. History—New 7-29-69, Formerly 25-6.44, Amended 2-25-93,

25-6.0455 Annual Distribution Service Reliability Report.

(1) Each utility shall file a ~~written~~ Distribution Service Reliability Report with the Director of the Commission’s Division of Economic Regulation Electric and Gas on or before March 1st of each year, ~~for covering~~ the preceding calendar year. The report shall contain the following information:

(a) The utility’s total number of Outage Events service interruptions(N), categorized by cause ~~for the highest 10 causes of Outage Events as specified in Rule 25-6.044, and the Average Duration of Outage Events average length of service interruptions experienced (L-Bar) and Average Service Restoration Time (CAIDI).~~ The utility shall record these data and analyses on Form PSC/ECR 102-1, entitled “Outage Events” which may be obtained from the Division of Economic Regulation, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850, (850)413-6900;-

(b) Identification of the three percent of the utility’s Primary Circuits (feeders) with the highest number of feeder breaker interruptions. ~~For each primary circuit so Each feeder shall be identified the utility shall report the primary circuit identification by its number or name, substation origin, and general location, as well as the estimated number of affected customers by in each service class served by the feeder circuit, Number of Outage Events as well as the number of service interruptions (N), Average Duration of Outage Events and average length of service interruption (L-Bar), Average Service Restoration Time (CAIDI), whether the same circuit is being reported for the second consecutive year, the number of years the primary circuit was reported on the “Three Percent Feeder List” in the past five years, and the corrective action date of completion for the feeder.~~ The utility shall record these data and analyses on Form PSC/ECR 102-2, entitled “Three Percent Feeder List” which may be obtained from the Division of Economic Regulation, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850, (850)413-6900;

(c) The reliability indices SAIDI, CAIDI, SAIFI, MAIFIe, and CEMI5 for its system and for each district or region into which its system may be divided. The utility shall report these

data and analyses on Form PSC/ECR 102-3, entitled "System Reliability Indices" which may be obtained from the Division of Economic Regulation, 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850, (850)413-6900. Any utility furnishing electric service to fewer than 50,000 retail customers shall not be required to report the reliability indices MAIFIE or CEMIS:

(d) The calculations for each of the required indices and measures of distribution reliability;

(2) A utility may exclude from the Annual Distribution Service Reliability Report the Outage Events directly caused by one or more of the following: planned interruptions, a storm named by the National Hurricane Center, a tornado recorded by the National Weather Service, ice on lines, a planned load management event, an electric generation disturbance, an electric transmission system disturbance, or an extreme weather or fire event causing activation of the county emergency operation center.

(3) A utility may submit a request to exclude an Outage Event from the Annual Distribution Service Reliability Report that is not specifically provided for in subsection 25-6.0455(2), F.A.C. Such a request must be filed with the Commission's Division of the Commission Clerk and Administrative Services within 30 days of the Outage Event for which an exclusion is being requested. The Commission will approve the request if the utility is able to demonstrate that the outage was not within the utility's control, and that the utility could not reasonably have prevented the outage.

Specific Authority 366.05(1) FS. Law Implemented 366.03, 366.04(2)(c),(f),(5), 366.05, 366.05(7) FS. History—New 2-25-93, Amended

NAME OF PERSON ORIGINATING PROPOSED RULE:
Jim Breman

NAME OF SUPERVISOR OR PERSONS WHO APPROVED THE PROPOSED RULE: Florida Public Service Commission.

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 20, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: Vol. 28, No. 5, February 1, 2002

REGIONAL PLANNING COUNCILS

Central Florida Regional Planning Council

RULE TITLES:	RULE NOS.:
Introduction	29G-1.001
Objectives and Purpose	29G-1.002
Membership, Appointments, Terms of Office, Vacancies, Removal from Office	29G-1.003
Officers, Term of Office and Standing Committees	29G-1.004
Staff	29G-1.005
Operations	29G-1.006
General Information	29G-1.007

Useful Statutes	29G-1.008
Public Records	29G-1.009
Public Meetings	29G-1.010
DRI Fees	29G-1.011

PURPOSE, EFFECT AND SUMMARY: The repeal of Rule 29G-1 is proposed because the Joint Administrative Procedures Committee (JAPC) objects to the rule for lack of specific legislative authority. The rule is not necessary to the Planning Council, because there are locally adopted by laws and personnel procedures that address the policies contained in Rule 29G-1.001 through 29G-1.011.

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

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

SPECIFIC AUTHORITY: 120.53(1) FS.

LAW IMPLEMENTED: 120.53, 163.01 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: Mr. R. Douglas Leonard, Executive Director, Central Florida Regional Planning Council, 555 East Church Street, Bartow, FL 33830, (863)534-7130, Ext.130

THE FULL TEXT OF THE PROPOSED RULES IS:

29G-1.001 Introduction.

Specific Authority 120.53(1)(a) FS. Law Implemented 120.53(1), 163.01 FS. History—New 1-23-77, Formerly 29G-1.01, Repealed

29G-1.002 Objectives and Purpose.

Specific Authority 120.53(1), 163.01 FS. Law Implemented 120.53(1), 163.01 FS. History—New 1-23-77, Formerly 29G-1.02, Repealed

29G-1.003 Membership, Appointments, Terms of Office, Vacancies, Removal from Office.

Specific Authority 120.53(1)(a), 163.01 FS. Law Implemented 120.53(1), 163.01 FS. History—New 1-23-77, Formerly 29G-1.03, Repealed

29G-1.004 Officers, Term of Office and Standing Committees.

Specific Authority 120.53(1)(a), 163.01 FS. Law Implemented 120.53(1), 163.01 FS. History—New 1-23-77, Formerly 29G-1.04, Repealed

29G-1.005 Staff.

Specific Authority 120.53(1)(a), 163.01(4) FS. Law Implemented 120.53(1), 163.01 FS. History—New 1-23-77, Formerly 29G-1.05, Repealed

29G-1.006 Operations.

Specific Authority 120.53(1)(a), 112.061, 287 FS. Law Implemented 120.53(1), 163.01, 287.062 FS. History—New 1-23-77, Formerly 29G-1.06, Repealed

29G-1.007 General Information.

Specific Authority 120.53(1)(a), 160.02(3) FS. Law Implemented 120.53(1) FS. History–New 1-23-77, Formerly 29G-1.07, Repealed.

29G-1.008 Useful Statutes.

Specific Authority 120.53 FS. Law Implemented 120.53 FS. History–New 1-23-77, Formerly 29G-1.08, Repealed.

29G-1.009 Public Records.

Specific Authority 120.53(1)(a), 120.53(1),(6), 119.01 FS. Law Implemented 120.53(1), 163.01 FS. History–New 1-23-77, Formerly 29G-1.09, Repealed.

29G-1.010 Public Meetings.

Specific Authority 120.53(1), 163.01 FS. Law Implemented 120.53(1), 163.01 FS. History–New 1-23-77, Formerly 29G-1.10, Repealed.

29G-1.011 DRI Fees.

Specific Authority 120.54, 186.505 FS. Law Implemented 120.54, 380.06, 186.505 FS. History–New 1-23-77, Amended 9-12-84, Formerly 29G-1.11, Amended 2-8-88, Repealed.

NAME OF PERSON ORIGINATING PROPOSED RULE: R. Douglas Leonard, Executive Director, Central Florida Regional Planning Council

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Robert F. Bullard, Chairman, Central Florida Regional Planning Council.

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 7, 2002

DEPARTMENT OF CORRECTIONS

RULE TITLE: Employee Grooming, Uniform and Clothing Requirements

RULE NO.: 33-208.101

PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to provide for the issuance, wearing and control of correctional probation officer badges.

SUMMARY: The proposed rule sets forth requirements for the issuance, wearing and control of correctional probation officer badges.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: None.

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

SPECIFIC AUTHORITY: 944.09 FS.

LAW IMPLEMENTED: 20.315, 944.09 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Perri King Dale, Office of the General Counsel, Department of Corrections, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500

THE FULL TEXT OF THE PROPOSED RULE IS:

33-208.101 Employee Grooming, Uniform and Clothing Requirements.

(1) through (8) No change.

(9) Correctional Probation Officer Badges.

(a) Circuit administrators shall maintain control and inventory of correctional probation officer badges within each circuit.

1. The circuit administrator shall issue badges to officers after certification is received.

2. The circuit administrator or designee shall conduct quarterly circuit badge inventories and submit the circuit badge inventory to the regional director. The quarterly circuit badge inventory shall include the following information:

a. Badge number.

b. Name of officer, in the last-name-first-first-name-last format (or blank if not issued).

c. Circuit and office location.

d. Status (including issued, not issued, stolen, lost, or retired), and

e. Total counts for each status, including the total number of badges issued, the total number of badges not issued, the total number of badges stolen, the total number of badges lost, and the total number of badges retired.

3. The regional director or designee shall compile the circuit inventories to complete quarterly regional badge inventories and submit the regional badge inventories to the Director of Community Corrections.

(b) Only badges issued by the department shall be used to conduct officially designated duties.

(c) Use of the issued badge as a credential for personal purpose is prohibited.

(d) Badges shall be readily accessible in order for the correctional probation officer to properly identify himself or herself to the public.

(e) Loss or theft of a badge shall be reported to the officer's immediate supervisor within 72 hours of the officer becoming aware that the badge was stolen or lost. Theft or loss of a badge shall be reported by the officer on the Community Corrections Incident Report, Form DC3-225, followed by a MINS report by the circuit administrator. Form DC3-225 is incorporated by reference in Rule 33-302.104, F.A.C. The officer shall be responsible for reimbursing the department for any issued badge which is lost or stolen.

(f) Correctional probation officers shall maintain their original badge issued if transferred to another circuit or region. The circuit administrator or designee in both circuits shall update their badge inventories accordingly. Once the officer has transferred to another circuit, the sending circuit administrator or designee shall remove the badge information

from the circuit’s inventory and the receiving circuit administrator or designee shall add the badge information to his or her circuit’s inventory.

(g) Correctional probation officers who leave the department shall return their badges to the circuit administrator prior to departing.

(h) Correctional probation officers promoted to a position outside the class series or who retire from the department under honorable conditions and who are eligible to retire under the State of Florida retirement system, including retirement under medical disability, who desire to retain their issued badges, shall make a request to the regional director.

(i) Regional directors shall review requests submitted by employees to maintain their badges and forward recommendations to the Director of Community Corrections for final approval. Officers who retire shall be allowed to retain their issued badges. Officers who are promoted shall be allowed to keep their badges upon reimbursement of the department of the cost of a replacement badge.

(10)(9) No change.

Specific Authority 944.09 FS. Law Implemented 20.315, 944.09 FS. History–New 2-27-85, Amended 6-19-85, Formerly 33-4.07, Amended 3-6-88, 8-15-89, 2-12-91, 10-13-91, 4-19-98, 12-7-98, Formerly 33-4.007, Amended 10-5-99, 3-21-00, 12-18-00, 4-30-02.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Tina Hayes

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Michael W. Moore

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 9, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: June 7, 2002

AGENCY FOR HEALTH CARE ADMINISTRATION

Certificate of Need

RULE TITLE: RULE NO.:

Long-Term Care Hospital Beds 59C-1.045

PURPOSE AND EFFECT: The agency is proposing a rule for use in certificate of need (CON) review of proposals to establish or expand long-term care hospitals. There is no current CON rule that deals exclusively with this subject. The new rule describes the type of patients served in long-term care hospitals, the type of services provided, geographic service planning areas, agency preferences among competing applicants, and required content of a CON application. Service-specific rules like the one proposed are used in conjunction with statutory review criteria in evaluation of applications for a CON.

SUMMARY: The agency is proposing a rule for use in certificate of need (CON) review of proposals to establish or expand long-term care hospitals.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: None 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: 408.15(8), 408.034(6) FS.

LAW IMPLEMENTED: 408.034(3), 408.036(1)(a), (b),(c),(d), (f),(g) FS.

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

TIME AND DATE: 2:00 p.m. September 24, 2002

PLACE: Agency for Health Care Administration, 2727 Mahan Drive, Building 3, Conference Room D, Tallahassee, Florida
THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: John Davis, Certificate of Need, 2727 Mahan Drive, Building 1, Tallahassee, Florida

THE FULL TEXT OF THE PROPOSED RULE IS:

59C-1.045 Long-Term Care Hospital Beds.

(1) Agency Intent. This rule implements the provisions of subsection 408.034(3), and paragraphs 408.036(1)(a), (b), (c), (d), (f), and (g), Florida Statutes, to regulate proposals subject to comparative review for the establishment of new long-term care hospitals, the addition of beds to existing long-term care hospitals, and the conversion of licensed hospital beds to long-term care hospital beds.

(2) Definitions.

(a) “Agency.” The Agency for Health Care Administration.

(b) “Approved Long-Term Care Hospital Bed.” A proposed long-term care hospital bed for which a certificate of need, a letter of intent to grant a certificate of need, a signed stipulated agreement, or a final order granting a certificate of need was issued, consistent with the provisions of paragraph 59C-1.008(2)(b), Florida Administrative Code, as of the most recent published deadline for agency initial decisions prior to the letter of intent deadline, as specified in paragraph 59C-1.008(1)(g), Florida Administrative Code.

(c) “Charity Care.” That portion of hospital charges reported to the agency for which there is no compensation for care provided to a patient whose family income for the 12 months preceding the determination is less than or equal to 150 percent of the federal poverty level, unless the amount of hospital charges due from the patient exceeds 25 percent of the annual family income. However, in no case shall the hospital charges for a patient whose family income exceeds four times the federal poverty level for a family of four be considered charity. Charity care does not include bad debt, which is the portion of health care provider charges for which there is no compensation for care provided to a patient who fails to qualify for charity care; and does not include administrative or

courtesy discounts, contractual allowances to third-party payers, or failure of the hospital to collect full charges due to partial payment by government programs.

(d) "Conversion." For purposes of this rule, conversion means the reclassification of one type of licensed facility or type of licensed bed to another type of licensed facility or licensed bed.

(e) "District." A district of the agency defined in subsection 408.032(5), Florida Statutes.

(f) "Local Health Council." The council referenced in section 408.033, Florida Statutes.

(g) "Long-Term Care Hospital." A hospital licensed under Chapter 395, F.S., which meets the requirements of Part 412, subpart B, paragraph 412.23(e), Code of Federal Regulations; and, where applicable, also meets the requirements for a hospital within hospital specified under paragraph 412.22(e) of that subpart. A long-term care hospital is exempt from the Medicare acute care prospective payment system. A long-term care hospital has an average length of inpatient stay greater than 25 days for all hospital beds. Long-Term care hospitals are designed to provide extended care to patients who are clinically complex and have multiple acute or chronic conditions. Long-Term care hospitals typically provide programs in one or more of the following areas: respiratory care, particularly for ventilator-dependent patients; treatment of patients with multiple illnesses or multiple systems failure; treatment of wounds caused by disease or accident; and treatment for patients requiring interdisciplinary rehabilitation services who are unable to tolerate the more intensive treatments provided in a comprehensive medical rehabilitation hospital.

(h) "Service Planning Area." The multi-district geographic area used in planning for long-term care hospitals. Applications for long-term care hospitals will be comparatively reviewed within each of the five service planning areas delineated as follows:

1. Service planning area I includes districts 1 and 2.
2. Service planning area II includes districts 3 and 4.
3. Service planning area III includes districts 5, 6 and 8.
4. Service planning area IV includes districts 7 and 9.
5. Service planning area V includes districts 10 and 11.

(3) General Provisions.

(a) Conformance with the Criteria for Approval. A certificate of need for the establishment of a new long-term care hospital, or the expansion of existing services by the addition of beds, shall not normally be approved unless the applicant meets the applicable review criteria in section 408.035, F.S., and the standards and need determination criteria set forth in this rule.

(b) Minimum Hospital Size. Freestanding long-term care hospitals established after the effective date of this rule shall have a minimum of 60 licensed beds. Long-Term care

hospitals designated as hospitals within hospitals established after the effective date of this rule shall have a minimum of 20 licensed beds.

(c) Required Services. Long-Term care hospital services, as provided by the hospital or by contract, shall include at a minimum:

1. Pre-admission screening.
2. Care for patients with multiple complex diagnoses.
3. Care for patients with multi-system failure.
4. Services for difficult-to-wean ventilator-dependent patients.
5. Services for patients who cannot be weaned from ventilator dependence.
6. Respiratory/pulmonary care.
7. Airway restoration.
8. Intensive wound care.
9. Nutrition services, including metabolic analysis, invasive enteral tube placement, and total parenteral nutrition.
10. Infusion therapy.
11. Daily physician assessments.
12. An average of at least 8 direct patient care nursing hours per patient per day.
13. Physical therapy, occupational therapy, speech therapy, and respiratory therapy.
14. On-site laboratory, radiology, and pharmacy.

(4) Criteria for Determination of Need.

(a) New Provider. In determining the need for a new long-term care hospital, the agency shall consider the proposed facility within the context of licensed or approved long-term care hospital beds in the service planning area, and the licensed acute care beds, comprehensive medical rehabilitation beds, hospital-based skilled nursing unit beds, and nursing home beds in the service planning area. The applicant proposing a new long-term care hospital shall provide documentation that the other licensed inpatient beds in the service planning area do not meet the need for the proposed service.

(b) Limitation on Approvals. The agency will not approve more than one new long-term care hospital for a service planning area during a review cycle. No additional long-term care hospital will be approved for a service planning area that has an approved new provider not yet licensed.

(c) Additional Beds at Existing Long-Term Care Hospitals.

1. Need for additional beds at an existing long-term care hospital is demonstrated if the occupancy rate of the hospital was at least 80 percent for the 12-month period ending 1 month prior to the letter of intent deadline.

2. The maximum number of additional beds which may be approved for an existing long-term care hospital shall not normally exceed the number which, if added to the current

licensed total, or the current total of licensed and approved beds, would reduce the 12-month occupancy, determined in subparagraph 1, to 75 percent.

(d) Consistency with Local Plans. Applicants shall provide evidence in their applications that a proposed long-term care hospital is consistent with the needs of the community and other criteria contained in Local Health Council Plans.

(e) Preferences Among Applicants for Long-Term Care Hospital Beds. In weighing and balancing statutory and rule review criteria, the agency will give preference to:

1. An applicant who provides or proposes to provide Medicaid days as a percentage of their total patient days equal to or greater than the statewide average percentage of Medicaid patient days provided by all long-term care hospitals, as determined in the Agency's most recent "Hospital Financial Data" report.

2. An applicant who has or proposes to have a ratio of charity care deductions to net patient service revenue equal to or greater than the statewide average ratio for all long-term care hospitals, as determined in the Agency's most recent "Hospital Financial Data" report.

3. An applicant who proposes to serve Medicaid-eligible persons.

4. An applicant who proposes to serve individuals without regard to their ability to pay.

5. An applicant who proposes to convert existing hospital beds.

(5) Quality of Care. Long-Term care hospital services shall comply with the agency standards for long-term care hospital licensure described in Chapter 59A-3, Florida Administrative Code. Applicants who include a statement in their certificate of need application that they will meet applicable agency licensure standards are deemed to be in compliance with this provision.

(6) Services Description. An applicant for long-term care hospital beds shall provide a detailed program description in its certificate of need application including:

(a) Characteristics of age groups to be served by age and diagnosis.

(b) Specialty programs to be provided.

(c) Proposed staffing, including qualifications of the medical director, a description of staffing appropriate for any specialty program, and a description of the training and experience requirements for all staff who will provide direct patient care.

(d) Expected sources of patient referrals. Applicants shall include evidence of transfer agreements with local hospitals indicating an intent to discharge appropriate patients to the proposed long-term care hospital.

(e) Expected average length of stay for discharges by age group.

(f) Expected discharge destination by age group.

(g) Projected number of patient days by payer type, including Medicare, Medicaid, private insurance, self-pay and charity care patient days for the first 2 years of operation after completion of the proposed project.

(h) Admission policies of the facility with regard to charity care patients.

(7) Applications from Licensed Long-Term Care Hospitals. A licensed long-term care hospital seeking approval for additional inpatient beds shall provide the following information in addition to the information required by subsection (6):

(a) Number of admissions and patient days by age group and diagnosis for the 12-month period ending 1 month prior to the letter of intent deadline.

(b) Number of patient days by payer type, including Medicare, Medicaid, private insurance, self-pay and charity care patient days, for the 12-month period ending 1 month prior to the letter of intent deadline.

(c) Gross revenues by payer source for the 12-month period ending 1 month prior to the letter of intent deadline.

(d) Current staffing.

(e) Current specialized treatment programs.

(8) Quarterly Reports. Licensed long-term care hospitals shall report to the agency or its designee, within 45 days after the end of each calendar quarter, the number of admissions and patient days by age and primary diagnosis that occurred within the quarter.

Specific Authority 408.15(8), 408.034(6) FS. Law Implemented 408.034(3), 408.036(1)(a),(b),(c),(d),(f),(g) FS. History--New

NAME OF PERSON ORIGINATING PROPOSED RULE:
John Davis, Health Services and Facilities Consultant
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Karen Rivera, Consultant Supervisor
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 16, 2002
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: July 26, 2002

DEPARTMENT OF HEALTH

Board of Acupuncture

RULE TITLE: Unauthorized Practice Fee
PURPOSE AND EFFECT: To clarify the existing language.
SUMMARY: This rule amendment is intended to clarify the existing language pursuant to Section 456.065(3), F.S.
SPECIFIC AUTHORITY: 456.065 FS.
LAW IMPLEMENTED: 456.065 FS.
IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE NEXT AVAILABLE ISSUE OF THE FLORIDA ADMINISTRATIVE WEEKLY.

RULE NO.: 64B1-2.016

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

THE FULL TEXT OF THE PROPOSED RULE IS:

64B1-2.016 Unauthorized Practice Fee.

As provided in Section 456.065(3), Florida Statutes, the fee for enforcement of the laws prohibiting the unauthorized practice of acupuncture shall be \$5.00 in addition to ~~of~~ the initial license fee and the license renewal fee each biennium.

Specific Authority 456.065 FS. Law Implemented 456.065 FS. History—New 10-17-93, Formerly 61F1-2.016, 59M-2.016, Amended 10-15-97, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Acupuncture

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 10, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 21, 2001

DEPARTMENT OF HEALTH

Board of Occupational Therapy Practice

RULE TITLE: Applicants Seeking Reentry

RULE NO.: 64B11-2.012

PURPOSE AND EFFECT: The Board proposes to create a new rule, which will require persons who are attempting to reenter the field to submit continuing education documentation.

SUMMARY: Fifty continuing education units, a portion of which may be home study, must be obtained by occupational therapists who have not actively practiced within the last 5 years.

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

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

SPECIFIC AUTHORITY: 468.204, 468.209 FS.

LAW IMPLEMENTED: 468.209(5) FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kaye Howerton, Board Executive Director, Board of Occupational Therapy Practice, 4052 Bald Cypress Way, Bin #C05, Tallahassee, Florida 32399-3255

THE FULL TEXT OF THE PROPOSED RULE IS:

64B11-2.012 Applicants Seeking Reentry.

An applicant seeking reentry into the profession who has not been in active practice within the last five years must submit to the Board documentation of 50 occupational therapy continuing education units, 12 of which may be home study, taken within the year prior to licensure.

Specific Authority 468.204, 468.209 FS. Law Implemented 468.209(5) FS. History—New _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Occupational Therapy

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: June 24, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 2, 2002

DEPARTMENT OF HEALTH

Board of Occupational Therapy Practice

RULE TITLE: Applicants Seeking Reentry

RULE NO.: 64B11-3.009

PURPOSE AND EFFECT: The Board proposes to create a new rule which will require persons who are attempting to reenter the field to submit continuing education documentation.

SUMMARY: Fifty continuing education units, a portion of which may be home study, must be obtained by occupational therapy assistants who have not actively practiced within the last 5 years.

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

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

SPECIFIC AUTHORITY: 468.204, 468.209 FS.

LAW IMPLEMENTED: 468.209(5) FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kaye Howerton, Board Executive Director, Board of Occupational Therapy Practice, 4052 Bald Cypress Way, Bin #C05, Tallahassee, Florida 32399-3255

THE FULL TEXT OF THE PROPOSED RULE IS:

64B11-3.009 Applicants Seeking Reentry.

An applicant seeking reentry into the profession who has not been in active practice within the last five years must submit to the Board documentation of 50 occupational therapy continuing education units, 12 of which may be home study, taken within the year prior to licensure.

Specific Authority 468.204, 468.209 FS. Law Implemented 468.209(5) FS. History--New

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Occupational Therapy

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: June 24, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 2, 2002

DEPARTMENT OF HEALTH

Board of Occupational Therapy Practice

RULE TITLE: Continuing Education Program Approval RULE NO.: 64B11-6.001

PURPOSE AND EFFECT: The Board proposes to update and add to existing rule text.

SUMMARY: The Board is authorizing continuing education credits for courses in the field that are sponsored by a college or university. A maximum of 5 continuing education credits are authorized for certain videocassette courses.

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

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

SPECIFIC AUTHORITY: 456.013(8), 456.025, 468.204, 468.219(2) FS.

LAW IMPLEMENTED: 468.219(2), 468.221 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kaye Howerton, Board Executive Director, Board of Occupational Therapy Practice, 4052 Bald Cypress Way, Bin #C05, Tallahassee, Florida 32399-3255

THE FULL TEXT OF THE PROPOSED RULE IS:

64B11-6.001 Continuing Education Program Approval.

(1) through (3) No change.

(4)(a) Programs meeting the above criteria and offered by the Florida Occupational Therapy Association (FOTA), the American Occupational Therapy Association (AOTA) and occupational therapy courses accredited by an accrediting board for occupational therapy shall be approved by this Board for continuing education and shall not pay the fees required in subsection (1) of this rule.

(b) Courses sponsored by a college or university when providing a curriculum for occupational therapists or occupational therapy assistants shall be awarded 10 hours of continuing education credit per semester hour.

(5) No change.

(6) A maximum of five contact hours may be awarded per biennium for approved videocassette courses prepared or updated not more than two years prior to the date of viewing or presentation. The Board shall approve videocassette courses that meet the content and criteria requirements set forth in subsection (5). At time of course presentation, rental, or sale, the course vendor, in lieu of the certificate of completion, shall provide the licensee with a signed course validation form. The licensee shall sign this form on the date that the course is actually taken or viewed indicating full attendance and successful completion. It shall be retained for four years with a copy for the department at the time of licensure renewal.

(6) through (7) renumbered (7) through (8) No change.

Specific Authority 456.013(8), 456.025, 468.204, 468.219(2) FS. Law Implemented 468.219(2), 468.221 FS. History--New 8-1-95, Amended 8-27-96, Formerly 59R-65.001, Amended 7-21-98, 4-25-01, 6-25-02

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Occupational Therapy

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

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: June 24, 2002

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 2, 2002

DEPARTMENT OF HEALTH

Board of Optometry

RULE TITLES: Inactive Status RULE NOS.: 64B13-11.001

Delinquent Status Licenses 64B13-11.004

PURPOSE AND EFFECT: The Board proposes to update these rules to remove obsolete language.

SUMMARY: Rule 64B13-11.001, F.A.C., sets out the criteria for placing a license in inactive status and how to return to active status at a later time. Rule 64B13-11.004, F.A.C., sets out the criteria for a delinquent status licensee to apply for active or inactive status and sets forth the fees and continuing education requirements necessary to return to active status.

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

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

SPECIFIC AUTHORITY: 456.036, 463.005(1) FS.

LAW IMPLEMENTED: 456.036 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Joe Baker, Jr., Executive Director, Board of Optometry/MQA, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257

THE FULL TEXT OF THE PROPOSED RULES IS:

64B13-11.001 Inactive Status.

(1) Any licensee may elect at the time of license renewal to place the license into inactive status by ~~filing with the board a complete application for inactive status and~~ paying the inactive status fee of Rule 64B13-6.001(8), F.A.C., ~~For the purpose of this section, a complete application shall be a renewal form provided by the Department of Health on which the licensee affirmatively elects inactive status.~~

(2) An inactive status licensee ~~whose license has been in inactive status for less than two consecutive biennial licensure cycles~~ may change to active status at any time provided the licensee meets the following requirements of Rule 64B13-5.001, F.A.C.:

(a) ~~Completes continuing education consisting of:~~

1. ~~Completion of fifteen (15) clock hours per year of continuing professional education which fulfills the requirements of Rule 64B13-5.001, F.A.C., for each year the license was inactive. At least five (5) of the fifteen (15) clock hours must be of "transcript quality" as defined in Rule 64B13-5.001. However, a license which has been inactive for less than one (1) year is not required to satisfy this requirement,~~

2. ~~Completion of thirty (30) hours of approved continuing professional education which were required for renewal of an active license on the date the license became inactive in the manner provided for in Rule 64B13-5.001, F.A.C.;~~

~~(a)(b)~~ Discloses any disciplinary action that has been taken against any license to practice optometry the practitioner possessed in any jurisdiction during the time period in which the Florida license was inactive;

~~(b)(e)~~ Pays the active status fee of subsection 64B13-6.001(4), F.A.C., for each biennium during which the license was inactive;

~~(c)(d)~~ Pays the reactivation fee of subsection 64B13-6.001(5), F.A.C.; and

~~(d)(e)~~ If applicable, the change of status fee in subsection 64B13-6.001(14), F.A.C.

(3) An inactive status licensee whose license has been in inactive status for more than two consecutive biennial licensure cycles and who applies for active status may change to active status at any time provided the licensee meets the following requirements:

(a) Meets the continuing education requirements of Rule 64B13-~~5.001, 11.001(2)~~, F.A.C.;

(b) through (f) No change.

~~(g) Files with the board a complete application. For the purpose of this section, a complete application shall be the application required for initial licensure or certification.~~

~~(4) Any inactive licensee who elects active status is not eligible to elect to return to inactive status until the next licensure renewal period.~~

~~(4)(5)~~ Pursuant to Section 463.015(1)(a), F.S., it is unlawful to practice optometry with an inactive license.

Specific Authority 456.036, 463.005(1), 463.007, 463.008 FS. Law Implemented 456.036, 463.007, 463.008 FS. History—New 11-20-86, Formerly 21Q-11.001, 61F8-11.001, Amended 12-22-94, Formerly 59V-11.001, Amended _____.

64B13-11.004 Delinquent Status License.

(1) through (2) No change.

(3) The delinquent status licensee who applies for active or inactive license status shall: ~~(a) file with the board the complete application for either active or inactive status as defined in Rule 64B13-11.001, F.A.C.;~~ (b) pay to the board either the active status fee of subsection 64B13-6.001(4), F.A.C., or the inactive status license fee of subsection 64B13-6.001(8), F.A.C., the delinquent status license fee of subsection 64B13-6.001(15), F.A.C., and, if applicable, the change of status fee of subsection 64B13-6.001(14), F.A.C.

(4) The delinquent status licensee who applies for active status license shall, in addition to complying with (3) immediately above, affirm compliance with the continuing education requirements of Rule ~~64B13-5.001, 1.001(2)~~, F.A.C.

Specific Authority 456.036, 463.005(1) FS. Law Implemented 456.036 FS. History—New 12-22-94, Formerly 59V-11.004, Amended 8-29-99, _____.

DEPARTMENT OF HEALTH

Board of Athletic Training

RULE TITLE: Disciplinary Guidelines
RULE NO.: 64B33-5.001

PURPOSE AND EFFECT: To define specific offenses and their range of penalties.

SUMMARY: The Board proposes to promulgate a new rule to set forth a range of offenses and penalties pursuant to sections 456.072 and 456.079, Florida Statutes.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: None.

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

SPECIFIC AUTHORITY: 456.072, 468.705, 468.719 FS.

LAW IMPLEMENTED: 456.072, 456.079, 468.719 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Sue Foster, Executive Director, Board of Athletic Training, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258

THE FULL TEXT OF THE PROPOSED RULE IS:

64B33-5.001 Disciplinary Guidelines.

(1) The Board provides within this rule disciplinary guidelines which shall be imposed upon applicants or licensees whom it regulates under Chapter 468, Part XIII, Florida

Statutes. The purpose of this rule is to notify applicants and licensees of the ranges of penalties which will routinely be imposed unless the Board finds it necessary to deviate from the guidelines for the stated reasons given within this rule. The ranges of penalties provided below are based upon a single count violation of each provision listed; multiple counts of the violated provisions or a combination of the violations may result in a higher penalty than that for a single, isolated violation. Each range includes the lowest and highest penalty and all penalties falling between. The purposes of the imposition of discipline are to punish the applicants or licensees for violations and to deter them from future violations; to offer opportunities for rehabilitation, when appropriate; and to deter other applicants or licensees from violations.

(2) Violations and Range of Penalties. In imposing discipline upon applicants and licensees, in proceedings pursuant to section 120.57(1) and 120.57(2), Florida Statutes, the Board shall act in accordance with the following disciplinary guidelines and shall impose a penalty within the range corresponding to the violations set forth below. The verbal identification of offenses are descriptive only; the full language of each statutory provision cited must be consulted in order to determine the conduct included.

(3) When the Board finds an applicant or licensee whom it regulates under Chapter 468, Part XIII, F.S., has committed any of the acts set forth in section 468.719, F.S., it shall issue a final order imposing appropriate penalties within the ranges recommended in the following disciplinary guidelines:

VIOLATIONS

(a) Failing to include the athletic trainer's name and license number in any advertising, including, but not limited to, business cards and letterhead, related to the practice of athletic training. Advertising shall not include clothing or other novelty items.

(b) Committing incompetency or misconduct in the practice of athletic training.

(c) Committing fraud or deceit in the practice of athletic training.

(d) Committing negligence, gross negligence, or repeated negligence in the practice of athletic training.

(e) While practicing athletic training, being unable to practice athletic training with reasonable skill and safety to athletes by reason of illness or use of alcohol or drugs or as a result of any mental or physical condition.

RECOMMENDED PENALTIES

First Offense

From a letter of concern to probation of the license, and an administrative fine ranging from \$250.00 to \$500.00, or refusal to certify an application for licensure.

From reprimand to probation of the license, and an administrative fine ranging from \$500.00 to \$750.00, or refusal to certify an application for licensure.

From reprimand to probation of the license, and if fraud is proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.

From reprimand to suspension of the license, and an administrative fine ranging from \$1,000.00 to \$2,500.00, or refusal to certify an application for licensure.

From reprimand to suspension of the license, and an administrative fine ranging from \$1,000.00 to \$2,500.00, or refusal to certify an application for licensure.

Second Offense

From probation to suspension of the license, and an administrative fine ranging from \$500.00 to \$750.00, or refusal to certify an application for licensure.

From probation to suspension of the license, and an administrative fine ranging from \$750.00 to \$1,000.00, or refusal to certify an application for licensure.

From probation to suspension of the license, and if fraud is proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.

From probation to revocation of the license, and an administrative fine ranging from \$2,500.00 to \$5,000.00, or refusal to certify an application for licensure.

From probation to revocation of the license, and an administrative fine ranging from \$2,500.00 to \$5,000.00, or refusal to certify an application for licensure.

Third Offense

From suspension to revocation of the license, and an administrative fine ranging from \$750.00 to \$1,000.00, or refusal to certify an application for licensure.

From suspension to revocation of the license, and an administrative fine ranging from \$1,000.00 to \$1,500.00, or refusal to certify an application for licensure.

From suspension to revocation of the license, and if fraud is proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.

From suspension to revocation of the license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.

From suspension to revocation of the license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.

(4) When the Board finds an applicant or licensee whom it regulates under Chapter 468, Part XIII, F.S., has violated 468.719(1)(a), F.S., by violating any of the following Board rules, it shall issue a final order imposing appropriate penalties within the ranges recommended in the following disciplinary guidelines:

VIOLATIONS

(a) Failure to comply with subsection 64B33-2.003(6), F.A.C., which requires the licensee to comply with the Department’s random audit of the licensee’s continuing education records.

(b) Failure to practice under a written protocol as required by subsection 64B33-4.001(1), F.A.C.

(c) Failure to develop a protocol, review the protocol prior to licensure renewal date, or failure to make protocol available upon request as required by subsection 64B33-4.001(2), F.A.C.

(5) When the Board finds an applicant or licensee whom it regulates under Chapter 468, Part XIII, F.S., has violated s. 456.072, F.S., by violating any of the following provisions, it shall issue a final order imposing appropriate penalties within the ranges recommended in the following disciplinary guidelines:

VIOLATIONS

(a) Making misleading, deceptive, or fraudulent representations in or related to the practice of athletic training. (456.072(1)(a), F.S.)

(b) Failing to comply with the educational course requirements for human immunodeficiency virus and acquired immune deficiency syndrome. (456.072(1)(e), F.S.)

First Offense

From a letter of concern to reprimand of the license, and an administrative fine ranging from \$250.00 to \$500.00, or refusal to certify an application for licensure.

From a letter of concern to reprimand of the license, and an administrative fine ranging from \$500.00 to \$1,000.00, or refusal to certify an application for licensure.

From a letter of concern to reprimand of the license, and an administrative fine ranging from \$500.00 to \$1,000.00, or refusal to certify an application for licensure.

RECOMMENDED PENALTIES

Second Offense

From reprimand to probation of the license, and an administrative fine ranging from \$750.00 to \$1,000.00, or refusal to certify an application for licensure.

From reprimand to suspension of the license, and an administrative fine ranging from \$1,000.00 to \$2,500.00, or refusal to certify an application for licensure.

From reprimand to suspension of the license, and an administrative fine ranging from \$1,000.00 to \$2,500.00, or refusal to certify an application for licensure.

Third Offense

From probation to revocation of license, and an administrative fine ranging from \$1,000.00 to \$2,500.00, or refusal to certify an application for licensure.

From probation to revocation of license, and an administrative fine ranging from \$2,500.00 to \$5,000.00, or refusal to certify an application for licensure.

From probation to revocation of license, and an administrative fine ranging from \$2,500.00 to \$5,000.00, or refusal to certify an application for licensure.

RECOMMENDED PENALTIES

Second Offense

From probation to revocation of the license, and if fraudulent representations are proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.

From reprimand to probation of the license, and an administrative fine ranging from \$500.00 to \$750.00, or refusal to certify an application for licensure.

Third Offense

From suspension to revocation of license, and if fraudulent representations are proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.

From suspension to revocation of license, and an administrative fine ranging from \$750.00 to \$1,000.00, or refusal to certify an application for licensure.

<p><u>(c) Having been found liable in a civil proceeding for knowingly filing a false report or complaint with the department against another licensee.</u> (456.072(1)(g), F.S.)</p>	<p><u>From reprimand to suspension of the license, and an administrative fine ranging from \$1,000.00 to \$2,500.00, or refusal to certify an application for licensure.</u></p>	<p><u>From probation to revocation of the license, and an administrative fine ranging from \$2,500.00 to \$5,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of the license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>
<p><u>(d) Aiding, assisting, procuring, employing, or advising any unlicensed person or entity to practice athletic training contrary to Chapters 468, Part XIII and 456, Florida Statutes, or the rules of the department or the board.</u> (456.072(1)(j), F.S.)</p>	<p><u>From reprimand to suspension of the license, and an administrative fine ranging from \$500.00 to \$1,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From probation to revocation of the license, and an administrative fine ranging from \$1,000.00 to \$5,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>
<p><u>(e) Failure to perform any statutory or legal obligation placed upon a licensee.</u> (456.072(1)(k), F.S.)</p>	<p><u>From letter of concern to probation of the license, and an administrative fine ranging from \$500.00 to \$1,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From reprimand to suspension of the license, and an administrative fine ranging from \$1,000.00 to \$5,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>
<p><u>(f) Making deceptive, untrue, or fraudulent representations in or related to the practice of a profession or employing a trick or scheme in or related to the practice of a profession.</u> (456.072(1)(m), F.S.)</p>	<p><u>From reprimand to suspension of the license, and if fraudulent representation(s) is proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From probation to suspension of the license, without the ability to reapply, and if fraudulent representation(s) is proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, without the ability to reapply, and if fraudulent representation(s) is proven, an administrative fine of \$10,000.00, or refusal to certify an application for licensure.</u></p>
<p><u>(g) Practicing or offering to practice beyond the scope permitted by law or accepting and performing professional responsibilities the licensee knows, or has reason to know, the licensee is not competent to perform.</u> (456.072(1)(o), F.S.)</p>	<p><u>From reprimand to suspension of the license, and an administrative fine ranging from \$250.00 to \$1,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From probation to revocation of the license, and an administrative fine ranging from \$1,000.00 to \$5,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>
<p><u>(h) Delegating or contracting for the performance of professional responsibilities by a person when the licensee delegating or contracting for performance of such responsibilities knows, or has reason to know, such person is not qualified by training, experience, and authorization when required to perform them.</u> (456.072(1)(p), F.S.)</p>	<p><u>From reprimand to suspension of the license, and an administrative fine ranging from \$500.00 to \$2,500.00, or refusal to certify an application for licensure.</u></p>	<p><u>From probation to revocation of the license, and an administrative fine ranging from \$2,500.00 to \$5,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>

<p><u>(i) Improperly interfering with an investigation or inspection authorized by statute, or with any disciplinary proceeding. (456.072(1)(r), F.S.)</u></p>	<p><u>From letter of concern to probation of the license, and an administrative fine ranging from \$1,000.00 to \$2,500.00, or refusal to certify an application for licensure.</u></p>	<p><u>From reprimand to suspension of the license, and an administrative fine ranging from \$2,500.00 to \$5,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, and an administrative fine ranging from \$5,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>
<p><u>(j) Engaging or attempting to engage a patient or client in verbal or physical sexual activity. For the purposes of this section, a patient or client shall be presumed to be incapable of giving free, full, and informed consent to verbal or physical sexual activity. (456.072(1)(u), F.S.)</u></p>	<p><u>From reprimand to suspension of the license, and an administrative fine ranging from \$1,000.00 to \$4,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From probation to revocation of the license, and an administrative fine ranging from \$4,000.00 to \$7,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, and an administrative fine ranging from \$7,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>
<p><u>(k) Failing to report to the board, or the department if there is no board, in writing within 30 days after the licensee has been convicted or found guilty of, or entered a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction. (456.072(1)(w), F.S.)</u></p>	<p><u>From reprimand to probation of the license, and an administrative fine ranging from \$1,000.00 to \$5,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From probation to suspension of the license, and an administrative fine ranging from \$5,000.00 to \$7,000.00, or refusal to certify an application for licensure.</u></p>	<p><u>From suspension to revocation of license, and an administrative fine ranging from \$7,000.00 to \$10,000.00, or refusal to certify an application for licensure.</u></p>

Specific Authority 456.072, 468.705, 468.719 FS. Law Implemented 456.072, 456.079, 468.719 FS. History—New

NAME OF PERSON ORIGINATING PROPOSED RULE:
Board of Athletic Training
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Board of Athletic Training
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: July 31, 2002
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: August 2, 2002

DEPARTMENT OF HEALTH

Division of Environmental Health

RULE TITLE:	RULE NOS.:
Definitions	64E-2.001
Prehospital Requirements for Trauma Care	64E-2.015
Trauma Transport Protocols Approval and Denial Process	64E-2.016
Trauma Agency Formation	64E-2.019
Trauma Agency Plan Approval and Denial Process	64E-2.020
Trauma Agency Implementation and Operation Requirements	64E-2.021
Security of Medications	64E-2.037

PURPOSE, EFFECT AND SUMMARY: TRAUMA TRANSPORT PROTOCOLS – Amends current rule governing submission requirements and content of trauma transport protocols.

LEAD CREW MEMBER – Amends current rule to include a definition as it relates to the individual who signs the run report and has responsibility for patient care decisions.

TRAUMA AGENCIES – Amends current rule governing trauma agency system evaluation and trauma agency five year plan update.

SECURITY OF MEDICATIONS – Amends rule to eliminate a written operating procedure for any emergency medical vehicle to adhere to the same onsite requirements for security and storage of medications.

STATEMENT OF ESTIMATED REGULATORY COSTS: None 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: 395.401, 395.4045, 401.35 FS.

LAW IMPLEMENTED: 395.401, 395.4045, 401.30, 401.35 FS.

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

TIME AND DATE: 10:00 a.m., September 23, 2002

PLACE: Division of Emergency Medical Services and Community Health Resources, 4025 Esplanade Way, Room 301 A & B, Tallahassee, Florida 32311-7829

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Pam Lesley, Government Analyst, Division of Emergency Medical Services and Community Health Resources, 4052 Bald Cypress Way, Bin #C18, Tallahassee, Florida 32399-1735, (850)245-4440, Ext. 2733 or Fax (850)921-8162

THE FULL TEXT OF THE PROPOSED RULES IS:

64E-2.001 Definitions.

(1) through (10) No change.

(11) Lead Crew Member – means the person designated as such by local provider protocols. He or she shall be responsible for run report completion and patient care decisions. This individual shall be identified by name on each patient care record completed pursuant to statute and rule.

(12)(11) Neonatal Ambulance – means an ALS permitted vehicle which is designated solely to interfacility transports of neonates to a Level II or Level III neonatal intensive care unit.

(13)(12) Neonatal Transport – means the transport of any neonate requiring emergency transfer from a hospital licensed under Chapter 395, F.S., to a Level II or Level III neonatal intensive care unit.

(14)(13) Neonate – means an infant less than 28 days of life and or less than 5 kg.

(15)(14) “Operate”, “Operates” or “Operation” – means providing, offering to provide, soliciting, or advertising prehospital or interfacility ALS services or BLS transportation services as further described in Rule 64E-2.032, F.A.C.

(16)(15) Patient Care Record – means the record used by each EMS provider to document patient care, treatment and transport activities that at a minimum includes the information required under paragraphs 64E-2.003(5)(a),(b), Rule 64E-2.013, subsection 64E-2.015(5), subsections 64E-2.017(5), (6), (7), 64E-2.0175(4), F.A.C.

(17)(16) Pediatric Trauma Patient – means a trauma patient with anatomical and physical characteristics of a person 15 years of age or younger.

(18)(17) Provisional State-Approved Pediatric Trauma Referral Center (SAPTRC) – means a hospital licensed under Chapter 395, F.S., which submits an application indicating that the hospital meets the trauma center requirements provided in DHP 150-9 and is approved by the department to provide pediatric trauma care services until approval or denial as a SAPTRC.

(19)(18) Provisional State-Approved Trauma Center (SATC) – means a hospital licensed under Chapter 395, F.S., which submits an application indicating that the hospital meets

the requirements provided in DHP 150-9 and is approved by the department to provide trauma care services until approval or denial as a SATC.

(20)(19) Training Program – means an educational institution having one designated program director, one designated medical director, and single budget entity; for the purposes of providing EMT or paramedic education programs.

(21)(20) Trauma – means a blunt, penetrating or burn injury caused by external force or violence.

(22)(21) Trauma Alert – means a notification initiated by EMS informing a hospital that they are en route with a patient meeting the trauma alert criteria.

(23)(22) Trauma Alert Patient – means a person whose primary physical injury is a blunt, penetrating or burn injury, and who meets one or more of the adult trauma scorecard criteria in Rule 64E-2.017, F.A.C., or the pediatric trauma scorecard criteria in Rule 64E-2.0175, F.A.C.

(24)(23) Trauma Patient – means any person who has incurred a physical injury or wound caused by trauma and who has accessed an emergency medical services system.

(25)(24) Trauma Registry – means a statewide database which integrates medical and system information related to trauma patient diagnosis and the provision of trauma care by prehospital, hospital, SATC, SAPTRC, providers and medical examiners.

(26)(25) Trauma Transport Protocols (TTPs) – means a document which describes the policies, processes and procedures governing the dispatch of vehicles, and the triage and transport of trauma patients.

Specific Authority 381.0011(13), 395.401, 395.4025(13), 395.405, 401.121, 401.35 FS. Law Implemented 381.0011, 395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, 395.4045, 395.405, 401.121, 401.211, 401.23, 401.25, 401.35, 401.435 FS. History—New 11-29-82, Amended 4-26-84, 3-11-85, 11-2-86, 4-12-88, 8-3-88, 8-7-89, 6-6-90, Formerly 10D-66.485, Amended 12-10-92, 11-30-93, 10-2-94, 1-26-97, Formerly 10D-66.0485, Amended 8-4-98, 7-14-99, 2-20-00, _____.

64E-2.015 Prehospital Requirements for Trauma Care.

(1) No change.

(2) Each EMS provider shall transport, or cause to be transported, every trauma alert patient to a SATC or SAPTRC nearest to the location of the incident, unless the distance is not relevant to the length of time for transport due to the use of an air ambulance. Pediatric trauma alert patients shall be transported to the nearest SAPTRC or SATC with SAPTRC services even if a SATC without SAPTRC services is nearer to the location of the incident, except as provided in department-approved TTPs. If a SATC or SAPTRC further from the location of the incident has a special resource(s) that the nearest SATC or SAPTRC does not have, such as burn center or hyper baric chamber, which is needed for the immediate condition of the trauma alert patient, the EMS provider may transport to the SATC or SAPTRC having that special resource(s) even if the SATC or SAPTRC is not nearest to the incident. These exceptions to transporting to the nearest

SATC or SAPTRC, or other exceptions the EMS provider wishes to request, shall be addressed in the EMS provider's TTPs which shall be submitted to the department for approval, in accordance with Chapter 395.4045, F.S. and Rule 64E-2.016, F.A.C.

(3) No change.

(a) An EMS provider must transport a trauma alert patient to a SATC or SAPTRC, except as may be provided in the EMS provider's department-approved TTPs. For situations for which the EMS provider intends to transport a trauma alert patient to a hospital other than SATC or SAPTRC, as indicated in the provider's or trauma agency's department-approved TTPs, the EMS provider or trauma agency shall ensure beforehand that the hospital meets the following criteria:

1. through (f) No change.

(g) If a hospital to which an EMS provider transports trauma alert patients, as provided in the EMS provider's or trauma agency department-approved TTPs, becomes a SATC or SAPTRC, including those granted provisional status by the department, the EMS provider shall begin immediately transporting trauma alert patients to that SATC or SAPTRC. The EMS provider or trauma agency shall revise and submit TTPs to the department for approval within 30 days of the hospital becoming a SATC or SAPTRC. Within 30 days of an EMS provider or a trauma agency receiving notification that a SATC or SAPTRC intends to discontinue as a SATC or SAPTRC, the EMS provider or trauma agency shall submit revised TTPs to the department for approval, in accordance with Rule 64E-2.016, F.A.C.

(4) No change.

(5) The EMS provider responsible for the patient shall ensure that a prehospital trauma alert is issued upon determining that a trauma patient meets the requirements of Rules 64E-2.017, and 64E-2.0175, F.A.C. The words "trauma alert" shall be used when notifying the SATC, or SAPTRC, or hospital that EMS is en route with a trauma alert patient. The medical director of the EMS provider issuing the trauma alert, or the physician at the receiving SATC, SAPTRC, or hospital, are the only people authorized to change the trauma alert status. The EMS provider issuing the trauma alert shall also provide the SATC, or SAPTRC, or hospital with information required under subsection 64E-2.013(5), F.A.C., and the information listed below at the time the patient is transferred to the personnel of the receiving SATC, SAPTRC or hospital:

- (a) Time of injury if different from the time of the call;
- (b) Date of injury if different from day of call;
- (c) County of injury;
- (d) County of residence of patient;
- (e) Cause of injury;
- (f) Injury site/type;

~~(g) Trauma alert criteria if met as defined in Rule 64E-2.017 or 64E-2.0175, F.A.C., and~~

~~(g)(h) Protective devices if motor vehicle crash, bicycle or marine crash.~~

The information listed above shall be documented on the patient care record of the transporting unit that delivered the patient in accordance with the requirements of Rule 64E-2.013, F.A.C.

(6) No change.

(7) Each EMS provider or trauma agency shall submit to the ~~have~~ department-approved TTPs for approval as required by the Trauma Transport Protocol Manual, July 2002, which is incorporated by reference and available from the department, which include at a minimum:

~~(a) Dispatch procedures which include:~~

~~1. A description of information to be solicited from the individual requesting emergency medical assistance in order to determine the number of patients, location of the incident, and extent and severity of reported injuries;~~

~~2. A description of the method used to ensure that the EMS vehicle most readily available is identified and dispatched to the location of the incident; and~~

~~3. A description of the process used to request assistance from emergency response agencies.~~

~~(b) Prehospital procedures which include:~~

~~1. Procedure which provides that upon arrival at the location of the incident, EMTs and paramedics assess the condition of each trauma patient to determine the transport destination, in accordance with sections 64E-2.017, and 64E-2.0175, F.A.C.;~~

~~2. A description of the methodologies used to assess the condition of and to measure the severity of injury of each adult trauma patient in accordance with section 64E-2.017, F.A.C., and of each pediatric trauma patient in accordance with section 64E-2.0175, F.A.C., to determine their transport destination.~~

~~3. Procedure to be followed by EMTs and paramedics for completion of the patient care record as defined under section 64E-2.001(15), F.A.C., and required under section 64E-2.013, F.A.C., and the trauma information as required under section 64E-2.015(5), F.A.C., and the delivery of such information with the trauma patient to a SATC, SAPTRC, or hospital;~~

~~4. Criteria used to determine when transport assistance shall be requested and the process used for obtaining such assistance. The criteria shall include and differentiate between air and ground ambulance services; and~~

~~5. Procedures for issuing a prehospital trauma alert.~~

~~(c) Transport destination criteria which include:~~

~~1. The criteria and process used to determine the transport destination of trauma alert patients; and~~

~~2. A list of situations, if any, in which it may be in the best medical interest of the trauma alert patient to be transported to a destination other than a SATC or SAPTRC, in accordance with the requirements of this section. Justification to support each situation shall be included.~~

~~(d) The procedures for an emergency inter-hospital transfer of a trauma patient.~~

~~(e) Written documentation that the TTPs submitted by the ALS, BLS or air ambulance provider have been approved by the provider's medical director.~~

~~(f) A list of SATCs, SAPTRCs, and hospitals to which the EMS provider intends to transport trauma alert patients.~~

~~(g) Written documentation that all hospitals, SATCs and SAPTRCs to which the EMS provider routinely transports have been provided a copy of the criteria which the EMS provider will follow to determine trauma transport destinations.~~

~~(8) Any EMS provider located in a trauma service area with a department approved local or regional trauma agency shall submit a copy of proposed or revised TTPs to the agency any time the EMS provider submits an initial or renewal license application, or revised TTPs, to the department. The EMS provider shall ensure that the agency's copy of the proposed or revised TTPs is received on or before the date that the initial or renewal license, or revised TTPs, are due to the department.~~

~~(9) A hospital licensed in another state which meets the criteria provided in section 64E-2.015(3)(c), F.A.C., may be identified in the TTPs as a hospital to which the EMS provider may transport a trauma alert patient, in accordance with the requirements in section 64E-2.015, F.A.C.~~

~~(10) A hospital in another state which has received approval from the appropriate governmental agency in that state to operate as a trauma center may be identified in TTPs as an approved trauma center.~~

Specific Authority 395.4045, 395.405, 401.35 FS. Law Implemented 395.401-395.403, 395.404-395.405, 395.4045, 401.30, 401.35 FS. History—New 8-3-88, Amended 12-10-92, 11-30-93. Formerly 10D-66.100, Amended 8-4-98, 7-14-99, 2-20-00, _____.

64E-2.016 Trauma Transport Protocols Approval and Denial Process.

(1) TTPs shall be approved by the EMS provider's or trauma agency's medical director prior to submission to the department for approval and in accordance with the Trauma Transport Protocol Manual, July 2002, which is incorporated in Rule 64E-2.015, F.A.C.

~~(2) Revisions to TTPs during the licensure period:~~

~~(a) Revisions must be submitted to the department, and to the trauma agency if one exists, for approval at least 60 days prior to the proposed implementation date. Other sections that mandate earlier submission under special circumstances shall take precedence over this 60 day requirement. The department shall, within 30 days of receipt, review the EMS provider's proposed TTPs to determine compliance with section 64E-2.015, F.A.C. The department will also consider the recommendations of the local or regional trauma agency, if one exists, before advising the EMS provider of any errors or~~

~~omissions. If there are any errors or omissions, the department shall request corrections or additional information from the EMS provider.~~

~~(b) The EMS provider shall submit the requested corrections or additional information within 15 days of receipt of the notice of errors or omissions.~~

~~(c) The department shall deem the TTPs complete upon receipt of the corrections or additional information, or upon expiration of the 15-day time period, whichever occurs first.~~

~~(d) The department shall review the EMS provider's proposed TTPs to determine compliance with section 64E-2.015, F.A.C., and will consider the recommendation of the local or regional trauma agency, within 15 days of receipt of the corrections or additional information, or within 15 days of the TTPs being deemed complete as originally submitted.~~

~~(e) The EMS provider may implement proposed changes to TTPs and submit a request for department approval within 30 days after a change is implemented if a delay in approval would have an adverse impact on the delivery of patient care. Changes in TTPs submitted to the department after implementation by the EMS provider will be reviewed by the department in accordance with paragraphs (2)(a)-(d) of this section.~~

~~(3) When submitting TTPs for department approval, each EMS provider, or trauma agency that has developed uniform TTPs, shall include a copy of the letters sent to the hospital's chief executive officers as well as documentation received in response from the hospital's chief executive officers indicating whether the hospital complies with 64E-2.015(3)(c), F.A.C.~~

~~(4) The department shall issue a letter of approval to the EMS provider upon determination that the TTPs are in compliance with section 64E-2.015, F.A.C.~~

~~(5) The department shall issue a letter of denial to the EMS provider upon determination that the TTPs are not in compliance with section 64E-2.015, F.A.C. The letter shall specify the deficiencies in the protocols and shall include notification of any right to a section 120.57, FS., hearing.~~

Specific Authority 395.405, 401.35 FS. Law Implemented 395.4045, 395.4045, 401.30, 401.35 FS. History—New 8-3-88, Amended 12-10-92, Formerly 10D-66.101, Amended _____.

64E-2.019 Trauma Agency Formation.

(1) To form a trauma agency, and for submission of the trauma agency 5 year plan update, a county or counties (if regional), or an entity with which the county or counties contract for the purpose of trauma service administration shall:

(a) through (2)(p)2. No change.

Specific Authority 395.401, 395.405, 401.35 FS. Law Implemented 395.401, 395.4015, 395.402, 395.4025, 395.405, 401.35 FS. History—New 8-3-88, Amended 12-10-92, Formerly 10D-66.104, Amended _____.

64E-2.020 Trauma Agency Plan Approval and Denial Process.

(1) The department shall, within 30 days of receipt of the formation of a trauma agency and the trauma agency 5 year plan update, review the proposed trauma agency's trauma system plan and notify the proposed trauma agency that the plan is complete, or that there are omissions. If there are omissions, the department shall request the required additional information to be submitted by the proposed trauma agency.

(2) The existing or proposed trauma agency shall submit the requested additional information to the department within 30 days of receipt of the notice of omissions.

(3) through (4) No change.

(5) The department shall issue a letter of approval to the existing or proposed trauma agency upon determination that the plan is in compliance with Chapters 395 and 401, F.S., and Chapters 59A-3 and 64E-2, F.A.C.

(6) The department shall issue a letter of denial to the existing or proposed trauma agency upon determination that the plan is not in compliance with Chapters 395 and 401, F.S., and Chapters 59A-3 and 64E-2, F.A.C. The letter shall specify the deficiencies in the plan and include notification of any right to a hearing pursuant to Section 120.57, F.S.

Specific Authority 395.401, 395.405, 401.35 FS. Law Implemented 395.401, 395.4015, 395.402, 95.4025, 395.405, 401.35 FS. History-New 8-3-88, Amended 12-10-92, Formerly 10D-66.106, Amended _____.

64E-2.021 Trauma Agency Implementation and Operation Requirements.

(1) No change.

(2) through (a) No change.

~~(b) Conduct reviews of proposed or revised TTPs submitted by each EMS provider within the defined geographic area of the trauma agency. Results of each review shall be submitted to the department within 15 days of receipt of the proposed or revised TTPs, in order to be considered by the department.~~

~~(b)(e) Conduct annual performance evaluations of the trauma system and submit the results to the department for approval, as provided in Rule 64E-2.020, F.A.C. The evaluation report shall be submitted by March 1 following the end of the previous calendar year within 60 days after completion of the evaluation. This evaluation shall include at least the following:~~

1. through 2. No change.

3. Collection of data on both prehospital and hospital patient care data, as defined by the trauma agency plan.

4. Documentation of the continuum of care and quality of medical care for all trauma patients from injury through rehabilitation or death.

5. Documentation that all state-approved trauma centers in the geographic area of the trauma agency participate in quality improvement process.

6. Results of monitoring for compliance with trauma registry reporting requirements.

(3) No change.

Specific Authority 395.405, 401.35 FS. Law Implemented 395.401, 395.4015, 395.402, 395.4025, 395.405, 401.35 FS. History-New 12-10-92, Formerly 10D-66.1065, Amended 8-4-98, 11-19-01, _____.

64E-2.037 Security of Medications.

(1) Each ALS and air ambulance provider shall develop, implement, maintain, and have available for review by the department written operating procedures approved and signed by the medical director for procuring, storing, handling, dispensing, and disposal of all controlled substances, medications, and fluids. ~~Such operating procedures and any records produced in accordance with such operating procedures shall be made available to the department upon request and retained by the licensee pursuant to section 64E-2.013(1), F.A.C. The provider's written operating procedures addressing controlled substances, medications, and fluids that are kept on-site and on vehicles shall include:~~

~~(a) Storage procedures for controlled substances, medications, and fluids. These procedures must address the provider's method for meeting applicable state and federal requirements, referenced in (2), to ensure safe handling, sanitary storage, and temperature and ventilation regulation of stored controlled substances, medications, and fluids. These procedures must also provide a method of segregating and storing medical supplies to preclude confusion of expired supplies with medical supplies authorized for current use.~~

~~(b) Effective January 1, 2003 emergency medical services providers shall develop and implement operating procedures for regulation of temperature and ventilation of controlled substances, medications and fluids stored on permitted vehicles. Each provider must also maintain and make available to the department copies of all pharmaceutical instructions.~~

~~(b)(e) Security procedures which include the provider's method of ensuring against theft, tampering with or contamination of controlled substances, medications, and fluids and the identities and position titles of employees who have access to controlled substances.~~

~~(c)(d) The amount of each controlled substance, authorized by the medical director, to be carried on board any vehicle and in on-site storage.~~

~~(d)(e) Documentation procedure for the distribution, disposal, and re-supply of controlled substances, medications, and fluids maintained on site, or carried on any vehicle of the provider. This procedure shall address on-site and shift change inventory procedures for all controlled substances stocked by the provider or carried on any vehicle of the provider and identify a record keeping procedure, which includes inventory schedules for stocking of medical supplies and reporting and resolving any discrepancy found during an inventory.~~

(2) No change.

Specific Authority 401.26, 401.35 FS. Law Implemented 401.25, 401.26 FS. History—New 9-3-00, Amended _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
 Pam Lesley, Management Analyst
 NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Roger Twitchell, Acting Division Director
 DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 12, 2002
 NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: April 5, 2002, June 7, 2002
 P.O. B00829

Section III Notices of Changes, Corrections and Withdrawals

DEPARTMENT OF INSURANCE

RULE NOS.:	RULE TITLES:
4-144.002	Approval Procedures
4-144.005	Credit for Reinsurance
4-144.010	Accounting Requirements; Life and Health Reinsurance Agreements

SECOND NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 27, No. 35, on August 31, 2001, of the Florida Administrative Weekly. These changes are being made to address concerns expressed at the public hearing and the rule challenge.

4-144.002 Approval Procedures.

~~(1) A retaliatory application fee shall be submitted pursuant to Section 624.5091, Florida Statutes. The retaliatory fee is the greater of:~~

~~(a) The amount that the applicant's domiciliary state or country would charge a Florida domestic insurer making application in the applicant's state or country of domicile, or~~

~~(b) The Florida application fee pursuant to Section 624.501(20)(c), Florida Statutes.~~

~~(1)(2) An insurer seeking the status of an accredited approved reinsurer pursuant to Section 624.610(3)(b)1. 624.610(2)(a)2., Florida Statutes, shall comply with the instructions contained in Form DI4-923, "Application For Accredited Approved Reinsurer Or Satisfactory Non-Approved Reinsurer Status," rev. 5/02 3/93 and submit the following forms. Forms relating to specific types of insurance are to be submitted only by companies issuing policies relating to the type of insurance specified on the form.~~

~~(a) Form DI4-927, "Application For License To Conduct Business In The State of Florida Accredited Reinsurer Status," rev 5/02 8-91;~~

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

~~(b)(e) Form DI4-903, "Invoice, Request For Payment of Fingerprint Charges," rev. 4/97 4/94;~~

~~(c)(d) Form DI4-1524 144, "Uniform Consent to Service of Process" rev. 5/02" Consent and Agreement in Re Service of Process," rev. 11-90;~~

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

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

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

~~(e)(h) Form DI4-1298 DI4-844, "Management Information Form," rev. 4/97 40-91;~~

~~(f)(i) Form DI4-1423 DI4-422, "Biographical Statement and Affidavit," rev. 5/02 11-90;~~

~~(j) Form DI4-450, "Authority For Release of Information," rev. 8-91;~~

~~(g)(k) Fingerprint cards furnished by the Department of Insurance, according to instructions in Form DI4-938, "Fingerprint Card Instructions," rev. 5/02 4/91;~~

~~(h)(l) The material required by Form DI4-905 "Instructions for Furnishing Background Investigative Reports," rev. 2/01 8/93;~~

~~(m) DI4-904, "Proformas, Life Companies, pages 1-4 (Exhibits 1A, 1B, 2A, and 2B)," rev. 5-91;~~

~~(n) DI4-896, "Proformas, Property and Casualty Companies, pages 1-18," rev. 5-91; and~~

~~(o) DI4-901, "Life, Accident and Health Insurer Lines of Business by Company Code," rev. 5/91.~~

~~(p) DI4-877, "Property and Casualty Insurer Lines of Business by Company Code," rev. 5/91.~~

~~(i) DI4-1464, "FORM AR-1 Certificate of Assuming Insurer", rev. 5/02;~~

~~(j) DI4-1465, "Invoice, Payment of Application Filing Fees," rev. 5/02;~~

~~(k) DI4-1538, "Checklist Verification," rev. 5/02;~~

~~(1)(q) In addition, prior to a final decision on whether to grant accredited approve the reinsurer status, the Department shall request such other information as is necessary, depending on the facts and circumstances of the specific insurer, pursuant to Section 624.610, Florida Statutes, to determine whether the insurer meets the standards and the financial standards to ensure adequate protection for those to whom they owe obligations. The financial standards used in making this determination shall be substantially as high as those applicable to an authorized insurer, as found in Part III of Chapter 624, 628, or Chapter 629, Florida Statutes. The Department shall make no final decision on reinsurer status without complete information.~~