

Section I

Notices of Development of Proposed Rules and Negotiated Rulemaking

**DEPARTMENT OF COMMUNITY AFFAIRS**

**Division of Housing and Community Development**

RULE CHAPTER TITLE: Florida Small Cities Community

RULE CHAPTER NO.: 9B-43

Development Block Grant Program	9B-43
<b>RULE TITLES:</b>	<b>RULE NOS.:</b>
Definitions	9B-43.003
Eligible Applicants	9B-43.004
Application Criteria	9B-43.005
Application Procedures for All Categories	9B-43.006
Scoring System	9B-43.007
Program Requirements for Housing	9B-43.009
Program Requirements for Neighborhood Revitalization	9B-43.010
Program Requirements for Economic Development	9B-43.012
Program Requirements for Commercial Revitalization	9B-43.013
General Grant Administration of All Categories	9B-43.014

**PURPOSE AND EFFECT:** To make changes to the Housing Rehabilitation Application Manual, the Neighborhood Revitalization Application Manual, the Commercial Revitalization Application Manual and the Economic Development Application, as well as modify the language in Rule Chapter 9B-43, Fla. Admin. Code.

**SUBJECT AREA TO BE ADDRESSED:** Changes to the application materials, as well as modifications to the language in Rule Chapter 9B-43, Fla. Admin. Code.

**SPECIFIC AUTHORITY:** 120.53, 290.048 FS.

**LAW IMPLEMENTED:** 290.042, 290.043, 290.044, 290.046, 290.047, 290.0475 FS.

**IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW:**

**TIME AND DATE:** 10:00 a.m. – 1:00 p.m., January 21, 2004  
**PLACE:** Randall Kelley Training Center, Room 305C, Sadowski Building, 2555 Shumard Oak Boulevard, Tallahassee, Florida 32399-2100

Any person requiring a special accommodation at this public hearing because of a disability or physical impairment should contact the Bureau of Community Assistance, (850)488-7956, at least five calendar days prior to the meeting. If you are hearing impaired, please contact the Department of Community Affairs using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Millie Schroeder, Planning Manager, Department of Community Affairs, 2555 Shumard Oak Boulevard, Tallahassee, Florida 32399-2100, (850)922-1885

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

**DEPARTMENT OF TRANSPORTATION**

RULE CHAPTER TITLE: Participation by Disadvantaged Business Enterprises

RULE CHAPTER NO.: 14-78

<b>RULE TITLES:</b>	<b>RULE NOS.:</b>
General	14-78.001
Time and General Procedural Requirements	14-78.0011
Definitions	14-78.002
General Responsibilities	14-78.003
Non-Federally Funded State DBE Program	14-78.004
Participation by Disadvantaged Business Enterprises	14-78.005
Procedure for Certification	14-78.007
Challenge Procedure	14-78.0071
Suspension or Revocation	14-78.008
Federal Appeal Rights	14-78.0081
Forms	14-78.009

**PURPOSE AND EFFECT:** This is a substantial amendment to Rule Chapter 14-78, F.A.C. Ten of the rules are to be repealed and Rule 14-78.005, F.A.C., is being substantially reworded. Special provision Section 7-25 of the *Standard Specifications for Road and Bridge Construction*, 2004 edition and the provisions of 49 C.F.R. Part 26 (Effective July 16, 2003) are incorporated by reference.

**SUBJECT AREA TO BE ADDRESSED:** This is a significant amendment of Rule Chapter 14-78, F.A.C., which includes repeal of 10 of the existing rules and substantial rewording of Rule 14-78.005, F.A.C.

**SPECIFIC AUTHORITY:** 337.125, 337.137, 339.0805 FS.

**LAW IMPLEMENTED:** 337.125, 337.137, 339.0805 FS.

**IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.**

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: James C. Myers, Clerk of Agency Proceedings, Florida Department of Transportation, Office of the General Counsel, 605 Suwannee Street, Mail Station 58, Tallahassee, Florida 32399-0458

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

**PARTICIPATION BY SOCIALLY AND ECONOMICALLY DISADVANTAGED BUSINESS ENTERPRISES INDIVIDUALS IN DEPARTMENT OF TRANSPORTATION CONTRACTS**

**14-78.001 General.**

Specific Authority 334.044(2), 339.0805(5) FS. Law Implemented 339.05, 339.0805 FS. History–New 12-9-81, Amended 5-23-84, Formerly 14-78.01, Amended 9-21-87, 5-4-88, Repealed \_\_\_\_\_.

**14-78.0011 Time and General Procedural Requirements.**

Specific Authority 334.044(2), 339.0805 FS. Law Implemented 339.05, 339.0805 FS. History–New 5-23-84, Formerly 14-78.011, Amended 9-21-87, 5-4-88, 12-2-93, Repealed \_\_\_\_\_.

**14-78.002 Definitions.**

Specific Authority 334.044(2), 339.05, 339.0805 FS. Law Implemented 339.05, 339.0805 FS. History–New 5-23-84, Formerly 14-78.02, Amended 9-21-87, 5-4-88, 4-17-89, 6-24-91, 4-15-92, 12-2-93, Repealed \_\_\_\_\_.

**14-78.003 General Responsibilities.**

Specific Authority 334.044(2), 337.125(4), 337.137(3) FS. Law Implemented 337.125, 337.137, 337.139, 339.05, 339.0805 FS. History–New 12-9-81, Amended 5-23-84, 11-10-85, Formerly 14-78.03, Amended 9-21-87, 5-4-88, 4-17-89, 6-24-91, 12-2-93, 10-30-96, 8-12-97, 12-31-98, Repealed \_\_\_\_\_.

**14-78.004 Non-Federally Funded State DBE Program.**

Specific Authority 334.044(2), 337.125(4), 337.137(3), 337.139, 339.0805 FS. Law Implemented 337.125, 337.137, 337.139, 339.0805 FS. History–New 12-2-93, Repealed \_\_\_\_\_.

(Substantial Rewording of Rule 14-78.005 follows. See Florida Administrative Code for present text.)

**14-78.005 Participation by Disadvantaged Business Enterprises Standards for Certification of DBEs.**

(1) Special Provision Section 7-25 of the Standard Specifications for Road and Bridge Construction, 2004 edition, is incorporated herein by reference.

(2) 49 C.F.R. Part 26 (Effective July 16, 2003) is incorporated herein by reference and adopted by the Department for participation by disadvantaged business enterprises in the Department’s federally funded projects. The provisions of 64 Federal Register No. 21, February 2, 1999, and 68 Federal Register No. 115, June 16, 2003, are available from the Department for informational purposes only. They also can be obtained on the Internet at <http://www.gpoaccess.gov/fr/index.html>.

Specific Authority 334.044(2), 337.125(4), 337.137(3), 339.0805(4) FS. Law Implemented 337.125, 337.137, 339.05, 339.0805 FS. History–New 12-9-81, Amended 5-23-84, Formerly 14-78.05, Amended 9-21-87, 5-4-88, 6-24-91, 12-2-93, 4-30-96, \_\_\_\_\_.

**14-78.007 Procedure for Certification.**

Specific Authority 334.044(2), 339.0805(1) FS. Law Implemented 120.57, 120.60, 334.044(27), 339.05, 339.0805 FS. History–New 12-9-81, Amended 5-23-84, Formerly 14-78.07, Amended 9-21-87, 5-4-88, 6-24-91, 12-2-93, 4-30-96, Repealed \_\_\_\_\_.

**14-78.0071 Challenge Procedure.**

Specific Authority 120.53(1)(b), 334.044(2), 339.0805 (1) FS. Law Implemented 120.57, 120.60, 334.044(27), 339.05, 339.0805 FS. History–New 6-24-91, Amended 12-2-93, Repealed \_\_\_\_\_.

**14-78.008 Suspension or Revocation.**

Specific Authority 334.044(2), 337.137(3), 339.0805(2) FS. Law Implemented 120.57, 334.044(27), 337.137, 339.05, 339.0805 FS. History–New 12-9-81, Amended 5-23-84, Formerly 14-78.08, Amended 9-21-87, 5-4-88, 6-24-91, 12-2-93, Repealed \_\_\_\_\_.

**14-78.0081 Federal Appeal Rights.**

Specific Authority 334.044(2), 339.0805(1) FS. Law Implemented 339.05, 339.0805 FS. History–New 5-23-84, Formerly 14-78.081, Amended 9-21-87, 12-2-93, Repealed \_\_\_\_\_.

**14-78.009 Forms.**

Specific Authority 334.044(2), 339.0805(1), (2) FS. Law Implemented 334.044(27), 339.05, 339.0805 FS. History–New 12-9-81, Amended 5-23-84, Formerly 14-78.09, Amended 9-21-87, 5-4-88, 6-24-91, 12-2-93, 4-30-96, Repealed \_\_\_\_\_.

**BOARD OF TRUSTEES OF THE INTERNAL IMPROVEMENT TRUST FUND**

Pursuant to Chapter 2003-145, Laws of Florida, all notices for the Board of Trustees of the Internal Improvement Trust Fund are published on the Internet at the Department of Environmental Protection’s home page at <http://www.dep.state.fl.us/> under the link or button titled “Official Notices.”

**DEPARTMENT OF CORRECTIONS**

RULE TITLE: Rules of Conduct  
 RULE NO.: 33-208.002  
 PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to clarify circumstances when employees are required to report incidents to their supervisors.  
 SUBJECT AREA TO BE ADDRESSED: Employee rules of conduct.  
 SPECIFIC AUTHORITY: 20.315, 944.09 FS.  
 LAW IMPLEMENTED: 944.09, 944.14, 944.35, 944.36, 944.37, 944.38, 944.39, 944.47 FS.  
 IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.  
 THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Perri King Dale, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

33-208.002 Rules of Conduct.

The Department of Corrections requires all employees to familiarize themselves with all rules and regulations pertaining to their positions and duties, and that employees abide by these rules and regulations. The following rules of conduct and performance standards are applicable both on and off the job to all Department of Corrections employees. Some of these rules of conduct are found again in abbreviated form in the next section titled "Range of Disciplinary Actions," however, all rules of conduct are enforceable by appropriate disciplinary action regardless of whether they are listed in the range of disciplinary actions.

(1) No change.

~~(2) Each employee shall make an immediate report to the Secretary, warden, or Officer in Charge of any violation of the law or the rules and regulations of the Department of which he has knowledge. Such employee's report may be required in writing at the discretion of the receiving official.~~

(2)(3)(a) Each employee shall make a full written report within 3 calendar days of any:

1. Criminal charge filed against him or

2. any Arrest or receipt of a Notice to Appear for any violation of any criminal law involving a misdemeanor or felony, or ordinance except minor traffic violations for which the fine or bond forfeiture is \$200 or less.

3. Knowledge of any violation of the law, rules, directives or procedures of the Department.

~~(b) In field locations~~ This report shall be submitted to the warden, regional director, ~~or circuit administrator or officer in charge~~; in central office this report shall be submitted to the employee's bureau chief or director.

(4) through (27) renumbered (3) through (26) No change.

Specific Authority 20.315, 944.09 FS. Law Implemented 944.09, 944.14, 944.35, 944.36, 944.37, 944.38, 944.39, 944.47 FS. History--New 10-8-76, Amended 10-11-77, 4-19-79, 6-18-83, Formerly 33-4.02, Amended 8-15-89, 10-20-90, 1-31-91, 3-20-91, 1-30-96, 3-24-97, 4-19-98, Formerly 33-4.002, Amended 7-17-02,\_\_\_\_\_.

**DEPARTMENT OF CORRECTIONS**

RULE TITLES: RULE NOS.:

State Classification Office and 33-601.209  
 Institutional Classification Teams

Elderly Offender Housing 33-601.217

Youthful Offenders – Definitions 33-601.220

Maximum Management 33-601.820

PURPOSE AND EFFECT: The purpose and effect of the proposed rules is to modify the definition of 'institutional classification team' to clarify the intent of the rule, i.e., that security interests be represented in team decisions. The proposed rules replace the requirement that a specific individual be on the team with the requirement that a high-ranking member of security staff be a part of the team.

SUBJECT AREA TO BE ADDRESSED: Inmate classification.

SPECIFIC AUTHORITY: 944.09 FS.

LAW IMPLEMENTED: 944.09 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Perri King Dale, 2601 Blair Stone Road, Tallahassee, Florida 32399-2500

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

33-601.209 State Classification Office and Institutional Classification Teams.

(1) No change.

(2) The State Classification Office shall be composed of a chairperson, a vice-chairperson and other members as designated by the Chief of Classification and Central Records.

~~(a)~~ The State Classification Office (SCO) refers to a staff member at the central office level who is responsible for the review of inmate classification decisions. Duties include approving or rejecting Institutional Classification team (ICT) recommendations.

(3) The Institutional Classification Team refers to the team consisting of the warden or assistant warden, classification supervisor, a correctional officer chief, and other members as necessary when appointed by the warden or designated by rule. The ICT is responsible for making work, program, housing and inmate status decisions at a facility and for making other recommendations to the State Classification Office (SCO) local classification decisions as defined in rule and procedure. The Institutional Classification Team shall be comprised of the following members:

~~(a) Warden or assistant warden who shall serve as chairperson.~~

~~(b) Classification supervisor.~~

~~(c) Chief of Security.~~

~~(d) Other members as necessary when appointed by the warden or designated by rule.~~

Specific Authority 944.09 FS. Law Implemented 944.09, 944.17, 944.1905, 958.11 FS. History--New 9-19-00, Amended \_\_\_\_\_.

33-601.217 Elderly Offender Housing.

(1) Definitions.

(a) Institutional Classification Team (ICT) – refers to the team consisting of the warden or assistant warden, classification supervisor, a correctional officer and chief, and other members as necessary when appointed by the warden or designated by rule. The ICT is of security, responsible for

making work, program, housing and inmate status decisions at a facility and for making other recommendations to the State Classification office (SCO).

(b) through (2) No change.

Specific Authority 944.09, 944.804 FS. Law Implemented 944.09, 944.804 FS. History—New 9-15-02, Amended \_\_\_\_\_.

33-601.220 Youthful Offenders – Definitions.

(1) through (6) No change.

(7) Institutional Classification Team (ICT) – refers to the team consisting of the warden or assistant warden, classification supervisor, a correctional officer and chief, and other members as necessary when appointed by the warden or designated by rule. The ICT of security which is responsible for making work, program, housing and inmate status decisions at a facility and for making other recommendations to the State Classification Office (SCO).

(8) through (9) No change.

Specific Authority 944.09, 958.11 FS. Law Implemented 944.09, 958.11 FS. History—New 3-13-01, Formerly 33-506.100, Amended 2-19-03, \_\_\_\_\_.

33-601.820 Maximum Management.

(1) No change.

(2) Definitions.

(a) No change.

(b) Institutional Classification Team (ICT) for Maximum Management Review — refers to the team consisting responsible for making local classification decisions. The Institutional Classification Team shall be comprised of the warden or aAssistant wWarden, who shall serve as Chairperson, cClassification sSupervisor, a correctional officer cChief of Security, and other members as necessary when appointed by the warden or designated by rule. The ICT is responsible for making work, program, housing and inmate status decisions at a facility and for making other recommendations to the State Classification Office (SCO).

(c) through (11) No change.

Specific Authority 944.09 FS. Law Implemented 944.09 FS. History—New 12-7-00, Amended 11-23-03, \_\_\_\_\_.

**AGENCY FOR HEALTH CARE ADMINISTRATION**

**Medicaid**

RULE TITLE: Aged and Disabled Adult Waiver Services  
 RULE NO.: 59G-8.610  
 PURPOSE AND EFFECT: The purpose of this rule is to incorporate by reference the Florida Medicaid Aged and Disabled Adult Waiver Services Coverage and Limitations Handbook, March 2004. This handbook includes the provider requirements, covered services, procedure codes and fees for the Florida Medicaid Aged and Disabled Adult Waiver Services Program. This handbook also includes changes required by the Health Insurance Portability and Accountability Act (HIPAA). The effect will be to incorporate

by reference in the rule the Florida Medicaid Aged and Disabled Adult Waiver Services Coverage and Limitations Handbook.

SUBJECT AREA TO BE ADDRESSED: Aged and Disabled Adult Waiver Services.

SPECIFIC AUTHORITY: 409.919 FS.

LAW IMPLEMENTED: 409.906, 409.908, 409.912, 409.913 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW.

TIME AND DATE: 8:30 a.m. – 9:30 a.m., January 14, 2004

PLACE: Agency for Health Care Administration, 2727 Mahan Drive, Building 3, 1st Floor Conference Room C, Tallahassee, FL

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: Jim Crochet, Medicaid Services, 2727 Mahan Drive, Building 3, Mail Stop 20, Tallahassee, Florida 32308-5407, (850)487-3028

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

59G-8.610 Aged and Disabled Adult Waiver Services.

(1) This rule applies to all Home and Community Based Services Aged and Disabled Adult Waiver Services providers enrolled in the Medicaid program.

(2) All Aged and Disabled Adult Waiver Services providers enrolled in the Medicaid program must be in compliance with the Florida Medicaid Aged and Disabled Waiver Services Coverage and Limitations Handbook, March 2004, incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, Non-Institutional 081 which is incorporated by reference in Rule 59G-8.200, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.908, 409.912, 409.913 FS. History—New \_\_\_\_\_.

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**Board of Auctioneers**

RULES TITLES: Application Fees 61G2-3.002  
 Examination Fees 61G2-3.003  
 RULES NOS.:  
 PURPOSE AND EFFECT: The Board proposes to review the rules to determine whether amendments are necessary.  
 SUBJECT AREA TO BE ADDRESSED: Application and examination fees.  
 SPECIFIC AUTHORITY: 468.385, 468.386(1), 468.387, 943.053 FS.  
 LAW IMPLEMENTED: 455.2171, 468.385, 468.385(4), 468.387, 943.053 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Julie Malone, Executive Director, Board of Auctioneers, 1940 North Monroe Street, Tallahassee, Florida 32399-0750

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

61G2-3.002 Application Fees.

The application fee for those applying for an auctioneer license through examination is \$50; for an auctioneer license by endorsement or reciprocity \$75; for an apprentice license \$50; and for an auction business license \$50. Additionally, each application shall be accompanied by a \$47 fingerprint processing fee.

Specific Authority 468.386(1), 943.053 FS. Law Implemented 468.385, 468.387, 943.053 FS., as amended by s. 7, Ch. 87-210, Laws of Florida. History—New 5-4-87, Amended 10-19-87, Formerly 21BB-3.002, Amended

61G2-3.003 Examination Fees.

(1) When the examination is not conducted by a professional testing service pursuant to Section 455.2171, Florida Statutes, \$250.00 payable to the Department. When the examination is conducted by a professional testing service pursuant to Section 455.2171, Florida Statutes, \$241.00 ~~237.00~~ payable to the Department plus \$9.00 ~~13.00~~ payable to the testing service.

(2) When the re-examination is not conducted by a professional testing service pursuant to Section 455.2171, Florida Statutes, \$250.00 payable to the Department. When the re-examination is conducted by a professional testing service pursuant to Section 455.2171, Florida Statutes, \$241.00 ~~237.00~~ payable to the Department plus \$9.00 ~~13.00~~ payable to the testing service.

Specific Authority 468.386(1) FS. Law Implemented 455.2171, 468.385(4) FS. History—New 5-4-87, Amended 9-13-88, Formerly 21BB-3.003, Amended 5-3-99, \_\_\_\_\_.

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**Construction Industry Licensing Board**

RULE TITLE: Continuing Education Requirements for Certificateholders and Registrants  
RULE NO.: 61G4-18.001  
PURPOSE AND EFFECT: The purpose of this rule development is to review the continuing education requirements.

SUBJECT AREA TO BE ADDRESSED: Continuing Education Requirements for Certificateholders and Registrants.

SPECIFIC AUTHORITY: 455.213(6), 455.2177, 455.2178, 455.2179, 489.108, 489.115 FS.

LAW IMPLEMENTED: 455.2123, 455.213(6), 455.2177, 455.2178, 455.2179, 455.271(b), 489.115, 489.116 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Timothy Vaccaro, Executive Director, Construction Industry Licensing Board, 1940 North Monroe Street, Tallahassee, Florida 32399-0783

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

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**Board of Professional Engineers**

RULE TITLE: Qualification Program for Special Inspectors of Threshold Buildings  
RULE NO.: 61G15-35.003

PURPOSE AND EFFECT: The Board proposes to amend this rule to update the language and to remove the subsections (1)(e) relating to self-certification of competency of applicant and (2) relating to automatically qualifying the registered professional engineers who are Certified Special Inspectors listed on the Roster maintained by the Department of Community Affairs.

SUBJECT AREA TO BE ADDRESSED: Qualification Program for Special Inspectors Threshold Buildings.

SPECIFIC AUTHORITY: 471.008, 471.033(2) FS.

LAW IMPLEMENTED: 471.015(7), 471.033 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Natalie Lowe, Executive Director, Florida Board of Professional Engineers, 2507 Callaway Road, Tallahassee, Florida 32303

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

61G15-35.003 Qualification Program for Special Inspectors of Threshold Buildings.

(1) The minimum qualifying criteria for Special Inspectors of Threshold Buildings, also referred to as Threshold Inspectors, established by the Board shall be as follows:

(a) Proof of current licensure in good standing as a licensed professional engineer whose principal practice is structural engineering in the State of Florida.

(b) Three years of experience in performing structural field inspections on threshold ~~type~~ buildings.

(c) Two years of experience in the structural design of threshold ~~type~~ buildings. For the purpose of these criteria, structural design shall mean the design of all structural components of the building and shall not be limited to specific structural components only, such as foundations, prestressed or post-tensioned concrete, etc.

(d) Experience in the structural inspection and/or design of at least three threshold ~~type~~ buildings. This experience must be within the ten calendar years preceding submission of the application.

~~(e) Self-certification as to the competency of the applicant to perform structural inspections on threshold buildings.~~

~~(2) All registered professional engineers who are certified Special Inspectors and on the Roster of Special Inspectors maintained by the Department of Community Affairs, pursuant to Rule 9B 3.043, F.A.C., as of June 30, 2000 shall be qualified pursuant to this rule and shall continue to be certified Special Inspectors of threshold buildings.~~

(3) through (5) renumbered (2) through (4) No change.

Specific Authority 471.008, 471.033(2) FS. Law Implemented 471.015(7), 471.033 FS. History--New 4-19-01, Amended 7-7-02,\_\_\_\_\_.

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**Board of Professional Engineers**

RULE TITLE: RULE NO.:

Common Requirements to All Engineers Providing Threshold Building Inspection Services as Special Inspectors 61G15-35.004

PURPOSE AND EFFECT: The Board proposes to amend this rule to change Threshold Building Inspectors to Special Inspectors for clarity and uniformity with other existing rules.

SUBJECT AREA TO BE ADDRESSED: Common Requirements to all Engineers Providing Threshold Building Inspection Services as Special Inspectors.

SPECIFIC AUTHORITY: 471.008, 471.033(2) FS.

LAW IMPLEMENTED: 471.015(7), 471.033 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Natalie Lowe, Executive Director, Florida Board of Professional Engineers, 2507 Callaway Road, Tallahassee, Florida 32303

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

61G15-35.004 Common Requirements to All Engineers Providing Threshold Building Inspection Services as Special Inspectors.

(1) For each Threshold Building, a notice shall be filed for public record, bearing the name, address, signature, date and seal of the Special Inspector, certifying that the Special Inspector is competent to provide the engineering services for the specific type of structure.

(2) ~~Special Threshold Building~~ Inspectors utilizing Authorized Representatives shall insure the Authorized Representative is qualified by education or licensure to perform the duties assigned by the Special Threshold Building Inspector. The qualifications shall include licensure as a professional engineer or architect; graduation from an engineering education program in civil or structural engineering; graduation from an architectural education program; successful completion of the NCEES Fundamentals Examination; or registration as building inspector or general contractor.

(3) ~~Special Threshold Building~~ Inspectors shall be in responsible charge of the work of the Authorized Representative, including reviewing reports and spot checks.

(4) ~~Special Threshold Building~~ Inspectors shall institute quality assurance procedures to include but not be limited to requiring unscheduled visits, utilization or relevant check lists, use of a Daily Inspection Report and insuring that the Special Inspector or the Authorized Representative is at the project whenever so required by the inspection plan.

Specific Authority 471.008, 471.033(2) FS. Law Implemented 471.015(7), 471.033 FS. History--New 3-21-01, Amended\_\_\_\_\_.

**DEPARTMENT OF ENVIRONMENTAL PROTECTION**

Pursuant to Chapter 2003-145, Laws of Florida, all notices for the Department of Environmental Protection are published on the Internet at the Department of Environmental Protection's home page at <http://www.dep.state.fl.us/> under the link or button titled "Official Notices."

**DEPARTMENT OF HEALTH**

**Board of Medicine**

RULE TITLE: Definitions  
 RULE NO.: 64B8-2.001

PURPOSE AND EFFECT: The Board proposes the development of a rule amendment to address the inappropriateness of administration of lidocaine injections by medical assistants.

SUBJECT AREA TO BE ADDRESSED: The inappropriateness of administration of lidocaine injections by medical assistants.

SPECIFIC AUTHORITY: 458.309, 458.315(1), 458.317(1)(c), 458.319(1), 458.3485, 766.314(4) FS.

LAW IMPLEMENTED: 456.072(2)(g), 458.303, 458.311, 458.313, 458.314(4), 458.315(1), 458.317(1)(c), 458.331(1)(u), 458.3485, 766.314(4) FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Larry McPherson, Jr., Executive Director, Board of Medicine/MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253

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

**DEPARTMENT OF HEALTH**

**Board of Medicine**

RULE TITLE: Application, Certification, Registration, and Licensure Fees  
 RULE NO.: 64B8-3.002

PURPOSE AND EFFECT: The Board proposes the development of a rule amendment to address an increase in the initial certification fee from \$385 to \$424.

SUBJECT AREA TO BE ADDRESSED: An increase in the initial certification fee to \$424.

SPECIFIC AUTHORITY: 456.013, 456.025, 458.309, 458.311, 458.313, 458.3135, 458.3145, 458.315, 458.316, 458.3165, 458.317, 458.345, 458.347 FS.

LAW IMPLEMENTED: 456.013, 456.025, 456.036, 458.311, 458.3115, 458.3124, 458.313, 458.3135, 458.3145, 458.315, 458.316, 458.3165, 458.317, 458.345, 458.347 FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Larry McPherson, Jr., Executive Director, Board of Medicine/MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

64B8-3.002 Application, Certification, Registration, and Licensure Fees.

The following fees are prescribed by the Board:

(1) through (6) No change.

(7) The initial certification fee for any person who is issued a temporary certificate to practice in areas of critical need, public health certificate, public psychiatry certificate, or medical faculty certificate and the initial license fee for a person who is issued a license to practice as a physician as provided in Section 458.311, 458.3115, 458.3124, F.S., or Section 458.313, F.S.; or a limited license as provided in Section 458.317, F.S., shall be \$424.00 ~~\$385.00~~ with the following exceptions:

(a) through (d) No change.

(8) through (9) No change.

Specific Authority 456.013, 456.025, 458.309, 458.311, 458.313, 458.3135, 458.3145, 458.315, 458.316, 458.3165, 458.317, 458.345, 458.347 FS. Law Implemented 456.013, 456.025, 456.036, 458.311, 458.3115, 458.3124, 458.313, 458.3135, 458.3145, 458.315, 458.316, 458.3165, 458.317, 458.345, 458.347 FS. History—New 12-5-79, Amended 11-10-82, 8-11-85, 10-24-85, Formerly 21M-19.02, Amended 12-4-86, 11-3-87, 7-4-88, 10-23-89, 11-12-89, 11-11-90, 1-16-91, 1-9-92, 2-10-92, 9-7-92, Formerly 21M-19.002, Amended 9-21-93, Formerly 61F6-19.002, Amended 2-13-95, 2-20-96, 6-24-96, Formerly 59R-3.002, Amended 6-7-98, 8-11-98, 11-22-98, 12-14-99, 1-31-01, 11-20-01, 10-19-03, 12-2-03, \_\_\_\_\_.

**DEPARTMENT OF HEALTH**

**Board of Medicine**

RULE TITLE: Continuing Education for Biennial Renewal  
 RULE NO.: 64B8-13.005

PURPOSE AND EFFECT: The Board proposes the development of rule amendments to address continuing education credit for Board members.

SUBJECT AREA TO BE ADDRESSED: Continuing medical education for Board members.

SPECIFIC AUTHORITY: 456.013(6),(7), 456.031(4), 458.309, 458.319 FS.

LAW IMPLEMENTED: 456.013(6),(7), 456.031(1)(a),(3), 458.319(4) FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Larry McPherson, Jr., Executive Director, Board of Medicine/MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

64B8-13.005 Continuing Education for Biennial Renewal.

(1) No change.

(2)(a) For purposes of this rule, risk management means the identification, investigation, analysis, and evaluation of risks and the selection of the most advantageous method of correcting, reducing, or eliminating identifiable risks.

(b) Five hours of continuing medical education in the subject area of risk management may be obtained by attending one full day or eight (8) hours, whichever is more, of disciplinary hearings at a regular meeting of the Board of Medicine in compliance with the following:

1. through 2. No change.

3. The licensee must sign out with the Executive Director of the Board at the end of the meeting day or at such other earlier time as affirmatively authorized by the Board. A licensee may receive CME credit in risk management for attending the disciplinary portion of a Board meeting only if he or she is attending on that date solely for that purpose; he or she may not receive such credit if appearing at the Board meeting for another purpose. A member of the Board of Medicine may obtain 10 5 hours of continuing medical education per biennium in the subject area of risk management for attendance at the disciplinary portion of ~~one~~ Board meetings.

(3) through (7) No change.

(8) In addition to the continuing medical education credits authorized above, current and former Board members shall receive up to a maximum of 5 hours of credit per biennium in the area of risk management for serving on the Board's probable cause panel. Service on the Board's probable cause panel shall also satisfy the required continuing medical education on the prevention of medical errors as set forth in subsection (1)(e) of this rule.

(9) through (11) No change.

Specific Authority 456.013(6),(7), 456.031(4), 458.309, 458.319 FS. Law Implemented 456.013(6),(7), 456.031(1)(a),(3), 458.319(4) FS. History--New 9-7-86, Amended 11-17-87, 11-15-88, 1-31-90, 9-15-92, Formerly 21M-28.002, Amended 12-5-93, Formerly 61F6-28.002, Amended 3-1-95, 1-3-96, 1-26-97, Formerly 59R-13.005, Amended 5-18-99, 2-7-01, 6-4-02, 10-8-03,\_\_\_\_\_.

**DEPARTMENT OF HEALTH**

**Board of Medicine**

RULE TITLE:

Citation Authority

RULE NO.:

64B8-30.014

PURPOSE AND EFFECT: The Council proposes the recommendation of a rule amendment to address additions to the rule regarding violations appropriate for citations.

SUBJECT AREA TO BE ADDRESSED: Citation violations and penalties.

SPECIFIC AUTHORITY: 456.077, 458.309, 458.347(7)(g),(12) FS.

LAW IMPLEMENTED: 456.077, 458.331, 458.347(7)(g),(12) FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Larry McPherson, Executive Director, Board of Medicine/MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

64B8-30.014 Citation Authority.

(1) through (2) No change.

(3) The following violations with accompanying penalty may be disposed of by citation with the specified penalty:

VIOLATIONS PENALTY

(a) through (d) No change.

(e) Failure to notify Department of change of practice and/or mailing address.(Sections 456.035, 458.319(3), 458.331(1)(g), 458.347(7)(g), F.S.

\$125

(f) No change.

(g) Failure to report to the Department of addition/deletion/change of supervising physician(s). (Sections 456.035, 458.331(1)(g), 458.347(7)(e), (g), F.S.)

\$ \_\_\_\_\_

(4) through (7) No change.

Specific Authority 456.077, 458.309, 458.347(7)(g),(12) FS. Law Implemented 456.077, 458.331, 458.347(7)(g),(12) FS. History--New 3-3-02, Amended 5-19-03, 11-17-03,\_\_\_\_\_.

**DEPARTMENT OF HEALTH**

**Board of Osteopathic Medicine**

RULE TITLE:

Citation Authority

RULE NO.:

64B15-6.01051

PURPOSE AND EFFECT: The Council proposes the recommendation of a rule amendment to address additions to the rule regarding violations appropriate for citations.

SUBJECT AREA TO BE ADDRESSED: Citation violations and penalties.

SPECIFIC AUTHORITY: 456.077, 459.005, 459.022(7)(f),(12) FS.

LAW IMPLEMENTED: 456.077, 459.015, 459.022(7)(f),(12) FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Pamela King, Executive Director, Board of Osteopathic Medicine/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

64B15-6.01051 Citation Authority.

(1) through (2) No change.

(3) The following violations with accompanying penalty may be disposed of by citation with the specified penalty:

Violations	Penalty
(a) through (d) No change.	
(e) Failure to notify Department of change of practice <u>and/or mailing</u> address. (456.035, 459.008(3), 459.015(1)(g), 459.022(7)(f), F.S.)	\$ 125 fine
(f) No change.	
(g) Failure to report to the Department of <u>addition/deletion/change of supervising physician(s). (Sections 456.035, 459.015(1)(g), 459.022(7)(e),(g), F.S.)</u>	\$ _____

(4) through (7) No change.

Specific Authority 456.077, 459.005, 459.022(7)(f),(12) FS. Law Implemented 456.077, 459.015, 459.022(7)(f),(12) FS. History--New 3-10-02, Amended

**FISH AND WILDLIFE CONSERVATION COMMISSION**

**Freshwater Fish and Wildlife**

RULE TITLE: Grants Administration RULE NO.: 68A-2.015

PURPOSE AND EFFECT: The purpose of this proposed rule is to develop administrative rules to guide agency grants programs authorized by Section 370.23, F.S. and Chapter 372, F.S. The effect of the proposed rule will be to provide written administrative process for grants administration which is statutorily required for grants programs.

SUBJECT AREA TO BE ADDRESSED: Grants administration.

SPECIFIC AUTHORITY: Art. IV, Sec. 9, Fla. Const.

LAW IMPLEMENTED: Art. IV, Sec 9, Fla. Const.

A HEARING ON THE PROPOSED RULE DEVELOPMENT WILL BE HELD IN CONJUNCTION WITH THE COMMISSION'S REGULARLY SCHEDULED PUBLIC MEETING AT THE TIME, DATES AND PLACE SHOWN BELOW:

TIME AND DATES: 8:30 a.m. each day, February 4-6, 2004

PLACE: Amelia Island Plantation, 6800 First Coast Highway, Amelia Island, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Tim Breault, Division of Wildlife, 620 S. Meridian St., Tallahassee, FL 32399-1600, (850)488-3831; James Antista, General Counsel, Florida Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399-1600, (850)487-1764

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

**FISH AND WILDLIFE CONSERVATION COMMISSION**

**Marine Fisheries**

RULE CHAPTER TITLE:	RULE CHAPTER NO.:
Marine Special Activity License Program	68B-8
RULE TITLES:	RULE NOS.:
Introduction and Scope	68B-8.001
Definitions	68B-8.002
General Conditions and Restrictions	68B-8.003
Application Review Process and Evaluation Criteria	68B-8.004
Third Party Contractors	68B-8.005
Scientific Research Special Activity License	68B-8.006
Educational/Exhibitional Special Activity License	68B-8.007
Florida Marine Science Educators Association Certification	68B-8.008
Indigenous Marine Prohibited Species Special Activity License	68B-8.009
Stock Collection and Release Special Activity License	68B-8.010
Aquaculture Broodstock Collection Special Activity License	68B-8.011
Snook Special Activity License	68B-8.012
Non-Conforming Gear Special Activity Licenses and Exemptions	68B-8.013
Marine Chemical Special Activity License	68B-8.014
Dredge Special Activity License	68B-8.015
PURPOSE AND EFFECT: The purpose of this rule development effort is to consolidate all of the rules that govern the Special Activity License program into a single,	

comprehensive rule chapter that provides applicants with clear eligibility requirements, evaluation criteria, and special conditions that may apply to their license request. The effect of these changes will be that applicants will have a single rule to reference that contains all of the information necessary to apply for a Special Activity License instead of having to reference five separate FWC rules.

SUBJECT AREA TO BE ADDRESSED: Marine Special Activity Licenses.

SPECIFIC AUTHORITY: Art. IV, Sec. 9, Florida Constitution.

LAW IMPLEMENTED: Art. IV, Sec. 9, Florida Constitution.

IF REQUESTED AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 calendar days before the workshop/meeting by contacting Cindy Hoffman, ADA Coordinator, (850)488-6411. If you are hearing or speech impaired, please contact the agency by calling (850)488-9542.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: James V. Antista, General Counsel, Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399-1600, (850)487-1764

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

**FISH AND WILDLIFE CONSERVATION COMMISSION**

**Marine Fisheries**

RULE CHAPTER TITLE:	RULE CHAPTER NO.:
Red Drum (Redfish)	68B-22
RULE TITLES:	RULE NOS.:
Definitions	68B-22.002
Bag and Possession Limits; Sale Prohibited	68B-22.005
Catch-Hold-and-Release Tournament Exemption	68B-22.007

PURPOSE AND EFFECT: The purpose of this rule development effort is to authorize participants in redfish tournaments, through a permit issued by the Commission, to release a live redfish possessed in a live well or tank of specified circulation and capacity, for the purpose of harvesting and retaining another redfish. Under current rules, this practice is not allowed because a fish rendered into possession is considered to be harvested for purposes of the one-redfish per day bag limit. The effect of this effort should be to allow Florida to take advantage of the economic benefit of the popular tournaments without causing undue mortality on those fish that are held by the participants and later released.

SUBJECT AREA TO BE ADDRESSED: Redfish tournaments and catch-hold-and-release fishing by participants.

SPECIFIC AUTHORITY: Art. IV, Sec. 9, Florida Constitution.

LAW IMPLEMENTED: Art. IV, Sec. 9, Florida Constitution.

IF REQUESTED AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 calendar days before the workshop/meeting by contacting: Cindy Hoffman, ADA Coordinator, (850)488-6411. If you are hearing or speech impaired, please contact the agency by calling (850)488-9542.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: James V. Antista, General Counsel, Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399-1600, (850)487-1764

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

68B-22.002 Definitions.

(1) “Catch, hold and release”, means the intentional release of a live redfish, possessed in a live well or recirculating tank aboard a boat, for the purpose of harvesting another redfish.

~~(2)~~(+) No change.

(3) “Fishing tournament”, as used in this chapter, means a fishing competition involving 50 or more participants that has written rules and regulations, requires an entry fee, and awards prizes to competitors.

(4) “FWC” means the Florida Fish and Wildlife Conservation Commission.

~~(5)~~(2) “Harvest” means the catching or taking of a fish by any means whatsoever, followed by a reduction of such fish to possession. Fish that are caught but immediately returned to the water free, alive and unharmed are not harvested. In addition, temporary possession of a fish for the purpose of measuring it to determine compliance with the minimum or maximum size requirements of this chapter shall not constitute harvesting such fish, provided that it is measured immediately after taking, and immediately returned to the water free, alive and unharmed if undersize or oversize. A person engaged in catch, hold, and release pursuant to Rule 68B-22.007, F.A.C., shall not be considered to have harvested a redfish if it is released alive.

(3) through (8) renumbered (6) through (11) No change.

Specific Authority Art. IV, Sec. 9, Fla. Const. Law Implemented Art. IV, Sec. 9, Fla. Const. History—New 9-12-85, Amended 2-12-87, 1-1-89, 1-1-96, 1-1-98, Formerly 46-22.002, Amended \_\_\_\_\_.

68B-22.005 Bag and Possession Limits; Sale Prohibited.

(1) Bag Limits – Except as provided for in 68B-22.007, no person shall harvest more than one native redfish per day, nor possess more than one native redfish while in, on, or above the waters of the state or on any dock, pier, bridge, beach, or other fishing site adjacent to such waters. Elsewhere, no person shall possess more than two native redfish at any time.

(2) No change.

Specific Authority Art. IV, Sec. 9, Fla. Const. Law Implemented Art. IV, Sec. 9, Fla. Const. History–New 2-12-87, Amended 1-1-89, 6-3-91, 1-1-96, Formerly 46-22.005, Amended \_\_\_\_\_.

68B-22.007 Catch-Hold-and-Release Tournament Exemption.

(1) Except as provided in this rule, the practice of catching, holding, and releasing redfish is prohibited. The director of the Division of Marine Fisheries, or his designee, shall issue a tournament exemption permit to the director of a catch-and-release fishing tournament to allow redfish to be caught, held, and released during the tournament, and to allow the tournament to exceed redfish bag and possession limits pursuant to subsection 68B-22.005(1), F.A.C., after redfish have been weighed-in, provided that each of the following conditions is met:

(a) Tournament anglers and tournament staff agree to attempt to release alive all redfish that are caught, including those fish that are weighed-in.

(b) Each tournament angler possesses only one live redfish in the boat’s live well or recirculating tank at any one time.

(c) All boats used in the tournament contain recirculating or aerated live wells that are at least 3.3 cubic feet or 25 gallons in capacity.

(d) Dead redfish possessed by tournament anglers are not discarded. A dead redfish is considered harvested and will count as the daily bag limit for the tournament angler who harvested that fish.

(e) Redfish are maintained in an aerated recovery holding tank prior to release. Recovery holding tank requirements may be specified in the tournament exemption permit at the FWC’s discretion in order to increase survival of released redfish.

(f) The tournament provides the FWC with a description of the aerated recovery holding tank(s) used to maintain redfish alive after weigh-in.

(g) The tournament provides the FWC with a description of the location where tournament caught redfish will be released after they are weighed in. In order to increase survival of released redfish, release locations may be specified in the tournament exemption permit at the FWC’s discretion.

(h) The tournament permit holder shall submit a post-tournament report to the FWC indicating the number of fished weighed-in each day of the tournament, the number of fish weighed in dead each day, and the number of fish that died

after being weighed-in, but prior to release each day. The FWC may specify additional tournament reporting requirements as a condition of the tournament exemption permit.

(i) The tournament agrees to allow FWC staff the opportunity to collect research data and conduct research and onboard monitoring during the tournament, as needed.

(2) Application for issuance of a tournament exemption permit shall be made on a form provided by the FWC (Form DMF-SL 5000 (3-04), incorporated herein by reference). Tournament exemption permits will only be issued to catch-and-release redfish tournaments that agree to the permit conditions in subsection (1).

(3) Any anglers participating in a redfish tournament for which a tournament exemption permit has been issued shall have a copy of the permit in his or her possession at all times during tournament operating hours.

(4) Any violation of the conditions and requirements specified within the tournament exemption permit will be considered a violation of this rule.

Specific Authority Art. IV, Sec. 9, Fla. Const. Law Implemented Art. IV, Sec. 9, Fla. Const. History–New \_\_\_\_\_.

**FISH AND WILDLIFE CONSERVATION COMMISSION**

**Marine Fisheries**

RULE CHAPTER TITLE:	RULE CHAPTER NO.:
Spiny Lobster (Crawfish) and Slipper Lobster	68B-24
RULE TITLES:	RULE NOS.:
Definitions	68B-24.002
Commercial Requirements; Appeals	68B-24.0055
Gear: Traps, Buoys, Identification	
Requirements, Prohibited Devices	68B-24.006
Trap Reduction Schedule	68B-24.009

PURPOSE AND EFFECT: The primary purpose of this rule development effort is to fully implement the licensing program for commercial divers in the spiny lobster fishery. Secondary purposes include strengthening the prohibition against harvest from artificial habitat and suspending for three seasons the trap reduction program while a comprehensive study of the commercial fishery is concluded. The effect of this effort should be to encourage commercial divers to harvest from natural and not artificial habitat and maintenance of the health of the fishery pending the study results.

SUBJECT AREA TO BE ADDRESSED: Commercial harvest of spiny lobster.

SPECIFIC AUTHORITY: Art. IV, Sec. 9, Florida Constitution.

LAW IMPLEMENTED: Art. IV, Sec. 9, Florida Constitution.  
IF REQUESTED AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 calendar days before the workshop/meeting by contacting: Cindy Hoffman, ADA Coordinator, (850)488-6411. If you are hearing or speech impaired, please contact the agency by calling (850)488-9542.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: James V. Antista, General Counsel, Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399-1600, (850)487-1764

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

68B-24.002 Definitions.

As used in this rule chapter:

(1) through (7) No change.

(8) "Immediate family" refers to a commercial harvester's mother, father, sister, brother, spouse, son, daughter, step-father, step-mother, step-son, step-daughter, half-sister, half-brother, son-in-law, or daughter-in-law.

(8) through (14) renumbered (9) through (15) No change.

PROPOSED EFFECTIVE DATE: April 1, 2004.

Specific Authority Art. IV, Sec. 9, Fla. Const. Law Implemented Art. IV, Sec. 9, Fla. Const. History--New 7-2-87, Amended 7-2-90, 3-1-92, 6-1-94, 10-4-95, Formerly 46-24.002, Amended 7-7-03, 4-1-04.

68B-24.0055 Commercial Requirements; Appeals.

(1) No change.

(2) Beginning in the 2004-2005 fishing season, in addition to a valid saltwater products license with a restricted species endorsement and a valid crawfish endorsement, a commercial dive permit is required to harvest spiny lobster in commercial quantities by diving. This permit will be in the form of the letter D being added to the end of the existing crawfish number. Application for issuance of a commercial dive permit shall be made on a form provided by the Commission (Form DMF-SL0610 (4-04 7-03), Commercial Dive Permit Application), incorporated herein by reference.

(a) The applicant must have documented commercial dive lobster landings pursuant to Commission trip ticket records generated under the provisions of Rule Chapter 68E-5, F.A.C., during the license year July 1, 2000 through June 30, 2001, or July 1, 2001 through June 30, 2002, or during the license year July 1, 2002 through June 30, 2003.

(b) Commercial dive permits will not be issued to or renewed for applicants who own one or more lobster trap certificates. Trap certificates may only be transferred during the period August 1 to March 1 each year. An applicant who is otherwise eligible to receive a commercial dive permit in 2004-2005 but holds lobster trap certificates after March 1, 2004, may receive a commercial dive permit if the commission

is directed in writing to deactivate his/her lobster trap certificate account. Failure on the part of such an applicant to obtain the commercial dive permit for the 2004-2005 season is a waiver of eligibility for the dive permit until such a time that the commission authorizes issuance of new commercial dive permits.

(c) Effective January 1, 2005 and until July 1, 2010, no new commercial dive permits will be issued and no commercial dive permit will be renewed or replaced except those that were active during the 2004-2005 fishing season. Existing permits may only be issued to a single saltwater products license with a valid crawfish endorsement and a valid restricted species endorsement. Beginning in the 2005-2006 license year and in subsequent license years until July 1, 2010, persons holding a commercial dive permit that was active during the 2004-2005 license year or an immediate family member of that person must request renewal of the commercial dive permit before September 30 of each year. Failure to renew the commercial dive permit by September 30 of each year will result in forfeiture of the permit.

(d) An applicant who possesses both an individual saltwater products license and a vessel saltwater products license shall be considered to have only one saltwater products license for purposes of issuing a commercial dive permit. Landings reported on all the applicant's individual and vessel saltwater products licenses shall be used for determining if the applicant meets the criteria for receiving a single commercial dive permit specified in this subsection.

(e) In the event of death or disability of a person holding an active commercial dive permit, the permit may be transferred by the person or the executor of the estate to a member of his or her immediate family.

(f) Appeals. The Director of the Division of Marine Fisheries, or one or more designees of the director, shall consider disputes and other problems arising from the initial denial of the commercial dive permit. The Director shall submit a recommendation to the Executive Director of the Commission for resolution of the appeal, which recommendation shall either allot a permit to the appellant or uphold the denial of a permit.

1. An appeal of the initial denial of a commercial dive permit is initiated by submission of a completed appeals form (Form DMF-SL 0620 (4-04), incorporated herein by reference) to the Director of the Division of Marine Fisheries before May 1, 2004.

2. The burden of proof shall be on an appellant to demonstrate, through copies of trip tickets or other proof of landings, legitimate sales to a licensed wholesale dealer that were not reported by the dealer during the qualifying years or included in the agency landings database as of January 31, 2004.

3. The Executive Director of the Commission may accept or disapprove the recommendations of the Director of the Division of Marine Fisheries, with notice given in writing to each party in the dispute explaining the reasons for the final decision. The action of the Executive Director of the Commission constitutes final agency action, and is appealable pursuant to the requirements of Chapter 120, Florida Statutes.

(3) The commercial spiny lobster dive permit authorizes the holder to harvest spiny lobster in commercial quantities.

(a) A commercial dive permit may be issued only on a vessel saltwater products license.

(b) A commercial dive permit may only be issued on one of the holder's vessel saltwater products licenses in any one fishing year.

(c) A corporation that holds a commercial dive permit must designate a person who is thereby authorized to represent and harvest under the corporation's dive permit.

(4) Commercial harvest limits In Monroe County:

(a) Beginning August 6, 2004 2003, persons harvesting lobster commercially by diving shall be subject to a daily vessel harvest and possession limit of 250 spiny lobsters per day. For purposes of this paragraph, persons shall be considered to be harvesting lobster by diving if they are harvesting pursuant to a saltwater products license with a restricted species permit and crawfish license with a commercial dive permit or trap number and are simultaneously in possession of any artificial underwater breathing apparatus or gear.

(b) Beginning in the 2004 2005 fishing season, the daily harvest and possession limit in paragraph (a) shall apply to persons possessing a valid commercial diver permit issued pursuant to subsection (2).

(b)(e) Except as provided in paragraph (d), No more than 250 spiny lobsters shall be possessed aboard or landed from any vessel regardless of the number of commercial harvesters on board harvesting pursuant to this subsection.

(d) During the 2003-2004 fishing season, on any vessel from which spiny lobster are harvested commercially by diving, a vessel possession limit of 500 spiny lobsters shall apply if there are at least two commercial divers on board, each of whom must possess valid 2002-2003 and 2003-2004 saltwater products licenses, with restricted species endorsement and a valid crawfish endorsement applicable for both years. This documentation must match the individual diver's identity and be presented upon request.

(5) Persons harvesting lobster commercially by use of a bully net shall be subject to a daily harvest and possession limit of 250 spiny lobsters per day. No more than 250 spiny lobsters shall be possessed aboard or landed from any vessel which has been used for such commercial harvest, regardless of the number of such commercial harvesters on board the vessel.

PROPOSED EFFECTIVE DATE: April 1, 2004.

Specific Authority Art IV, Sec. 9, Fla. Const. Law Implemented Art IV, Sec. 9, Fla. Const. History—New 7-1-01, Amended 7-7-03, 4-1-04.

68B-24.006 Gear: Traps, Buoys, Identification Requirements, Prohibited Devices.

(1) through (5) No change.

(6) Each commercial harvester who harvests spiny lobster by diving shall permanently and conspicuously display on the boat used in such diving a "divers-down flag" symbol on an identification placard, which symbol shall have dimensions no less than 16 inches by 20 inches. The term "divers-down flag" shall have the meaning ascribed in Section 861.065(3), Florida Statutes. The commercial harvester's current crawfish license or trap number shall be permanently affixed to the diagonal stripe on the placard in legible figures to provide ready identification from the air and water. In addition to the "divers-down flag" symbol, the commercial diver permit number shall also be permanently and conspicuously displayed on any vessel used by a commercial diver to harvest spiny lobster, so as to be readily identifiable from the air and water, in the following manner:

(a) From the Air – The commercial dive permit number shall be displayed and be permanently affixed to the uppermost structural portion of the vessel in numerals no smaller than 10 inches in height. If the vessel is an open design, in lieu of a separate display, one seat shall be painted with the permit numbers unobstructed and no smaller than 10 inches in height.

(b) From the Water – The commercial dive permit number shall be displayed and be permanently affixed vertically to both the starboard and port sides of the vessel in numerals no smaller than 4 inches in height.

(7) through (9) No change.

(10) No person shall harvest any spiny lobster from artificial habitat. The harvest and possession in the water of spiny lobster in excess of the recreational bag limit is hereby prohibited within 25 yards of artificial habitat.

PROPOSED EFFECTIVE DATE: April 1, 2004.

Specific Authority Art. IV, Sec. 9, Fla. Const. Law Implemented Art. IV, Sec. 9, Fla. Const. History—New 7-2-87, Amended 7-2-90, 3-1-92, 7-1-92, 6-1-94, 10-4-95, 9-30-96, 6-1-99, Formerly 46-24.006, Amended 7-1-01, 7-9-02, 7-7-03, 4-1-04.

68B-24.009 Trap Reduction Schedule.

(1) Except as otherwise provided in this rule, beginning with the 2001-2002 license year, the maximum number of lobster trap certificates issued each season by the Commission pursuant to Section 370.142, Florida Statutes, shall be reduced each season by 4 percent from the total issued for the immediately previous season. These reductions shall be achieved through passive reductions pursuant to subsection (2). If in any year such passive reduction does not amount to 4 percent of available certificates, an active reduction shall be applied pursuant to subsection (3) to all lobster trap certificate holders to achieve the 4 percent target. If in any year, passive reductions pursuant to subsection (2) exceed 4 percent of

available certificates, the number of certificates in excess of 4 percent shall be applied to meet the 4 percent reduction target for the following year. Once the number of lobster trap certificates is reduced through this passive/active mechanism to 400,000, there shall be no further reduction in the number of lobster trap certificates issued each year.

(2) Passive Reduction – Upon the sale or transfer of certificates outside the immediate family of the certificate holder, the number of certificates received by the purchaser shall be reduced by 25 percent. Additionally, certificates forfeited due to conviction for theft from a spiny lobster trap pursuant to Section 370.142(2)(c)3., Florida Statutes, or reverting to the Commission for nonpayment of certificate fees pursuant to Section 370.142(2)(c)7., Florida Statutes, shall be included as trap certificates passively reduced in a license year.

(3) Active Reduction – If the total passive reduction in lobster trap certificates pursuant to subsection (2) in any license year does not total 4 percent of the certificates available during that season, an additional reduction in the number of available certificates shall be made at the end of the season in the appropriate percentage to achieve the 4 percent target reduction for that year. This reduction shall be applied on a pro rata basis to all lobster trap certificate accounts.

(4) Notwithstanding the provisions of subsections (1)-(3) of this rule, no trap reductions shall take place in the license years beginning with the 2004-2005 license year and continuing through the 2006-2007 license year. The term “immediate family” for purposes of this rule refers to a lobster trap certificate holder’s mother, father, sister, brother, spouse, son, daughter, step father, step mother, step son, step daughter, half sister, or half brother.

PROPOSED EFFECTIVE DATE: April 1, 2004.

Specific Authority Art. IV, Sec. 9, Fla. Const. Law Implemented Art. IV, Sec. 9, Fla. Const. History–New 3-1-92, Amended 6-1-94, 6-3-96, 3-5-97, Formerly 46-24.009, Amended 6-29-00, 7-1-01, 4-1-04.

**FISH AND WILDLIFE CONSERVATION COMMISSION**

**Marine Fisheries**

RULE CHAPTER TITLE:	RULE CHAPTER NO.:
Tarpon	68B-32
RULE TITLES:	RULE NOS.:
Definitions	68B-32.002
Gear Restriction	68B-32.004
Boca Grande Pass Designated Boundaries;	
Seasonal Restrictions	68B-32.005

PURPOSE AND EFFECT: The purpose of this rule development is to prohibit the snagging or snatch hooking of tarpon, and within Boca Grande Pass establish seasonal restrictions during April, May, and June that limit the number of fishing lines and prohibit the operator of a boat from actively fishing for tarpon. The effect of these changes will be

to reduce user conflicts among tarpon anglers while fishing in Boca Grande Pass and increase angler and boater safety while fishing for tarpon in the pass.

SUBJECT AREA TO BE ADDRESSED: Tarpon.

SPECIFIC AUTHORITY: Art. IV, Sec. 9, Florida Constitution.

LAW IMPLEMENTED: Art. IV, Sec. 9, Florida Constitution.

IF REQUESTED AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 calendar days before the workshop/meeting by contacting: Cindy Hoffman, ADA Coordinator, (850)488-6411. If you are hearing or speech impaired, please contact the agency by calling (850)488-9542.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: James V. Antista, General Counsel, Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399-1600, (850)487-1764

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

**FISH AND WILDLIFE CONSERVATION COMMISSION**

**Marine Resources**

RULE CHAPTER TITLE:	RULE CHAPTER NO.:
Permits for Collection and Possession of Indigenous Saltwater Animals for Experimental, Scientific, Educational or Exhibitional Purposes	68E-1
RULE TITLE:	RULE NO.:
General Permit Application Procedures, Requirements and Expiration	68E-1.004

PURPOSE AND EFFECT: This rule chapter, adopted in 1981, provided the general criteria for special activity permits for experimental, scientific, educational, or exhibitional purposes. The rule chapter also includes a section (Rule 68E-1.0061, F.A.C.) specific to marine turtles. General provisions in other rule sections also pertain to marine turtle activities. The purpose of this rule development effort is to amend Rule 68E-1.004, F.A.C., in conjunction with the repeal of rules in the chapter that do not pertain to marine turtles and substantially rewrite those provisions in new Rule Chapter 68B-8, F.A.C. The effect should be to make licensing in all these areas more understandable.

SUBJECT AREA TO BE ADDRESSED: Permits for Collection and Possession of Indigenous Saltwater Animals for Experimental, Scientific, Educational or Exhibitional Purposes.

SPECIFIC AUTHORITY: Art. IV, Sec. 9, Florida Constitution.

LAW IMPLEMENTED: Art. IV, Sec. 9, Florida Constitution.

IF REQUESTED AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 calendar days before the workshop/meeting by contacting: Cindy Hoffman, ADA Coordinator, (850)488-6411. If you are hearing or speech impaired, please contact the agency by calling (850)488-9542.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: James V. Antista, General Counsel, Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399-1600, (850)487-1764

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

**FISH AND WILDLIFE CONSERVATION COMMISSION**

**Marine Resources**

RULE CHAPTER TITLE: Spiny Lobster Trap Certificate Program  
 RULE CHAPTER NO.: 68E-18

RULE TITLE: Definitions  
 RULE NO.: 68E-18.002

PURPOSE AND EFFECT: The purpose of this rule development effort is to expand the definition of "immediate family" for purposes of the spiny lobster trap certificate program to include sons and daughters-in-law, in concert with an identical change made in Rule Chapter 68B-24, F.A.C. The effect will be to include additional family members who can have trap certificates transferred to them without the application of passive trap reduction.

SUBJECT AREA TO BE ADDRESSED: Spiny Lobster Trap Certificate Program.

SPECIFIC AUTHORITY: Art. IV, Sec. 9, Florida Constitution.

LAW IMPLEMENTED: Art. IV, Sec. 9, Florida Constitution.

IF REQUESTED AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD NOTICED IN THE NEXT AVAILABLE FLORIDA ADMINISTRATIVE WEEKLY.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 calendar days before the workshop/meeting by contacting: Cindy Hoffman, ADA Coordinator, (850)488-6411. If you are hearing or speech impaired, please contact the agency by calling (850)488-9542.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: James V. Antista, General Counsel, Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399-1600, (850)487-1764

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

68E-18.002 Definitions.

(1) through (9) No change.

(10) "Immediate Family" for purposes of the Lobster Trap Certificate Program means mother, father, sister, brother, spouse, son, daughter, step-son, step-daughter, step-father, step-mother, half sister, ~~or~~ half brother, son-in-law, or daughter-in-law of the individual certificate holder.

(11) through (21) No change.

Specific Authority Art IV, Sec. 9, Fla. Const. Law Implemented Art IV, Sec. 9, Fla. Const. History--New 5-16-95, Formerly 62R-18.002, Amended 7-1-01,

**DEPARTMENT OF FINANCIAL SERVICES**

**Division of Workers' Compensation**

RULE TITLE: Florida Workers' Compensation Medical  
 RULE NO.: 69L-7.602

PURPOSE AND EFFECT: This rule provides detailed procedures for billing Workers' Compensation claims in conformity with Chapter 440, FS.

SUBJECT AREA TO BE ADDRESSED: Workers' Compensation claim billing procedures.

SPECIFIC AUTHORITY: 440.13(4)(a),(b), 440.525(2), 440.591, 440.593(5) FS.

LAW IMPLEMENTED: 440.09, 440.13(2)(a),(3),(4),(6),(11), (12),(14), 440.20(6), 440.185(5),(9) FS.

IF REQUESTED IN WRITING AND NOT DEEMED UNNECESSARY BY THE AGENCY HEAD, A RULE DEVELOPMENT WORKSHOP WILL BE HELD AT THE TIME, DATE AND PLACE SHOWN BELOW:

TIME AND DATE: 9:30 a.m., January 13, 2004

PLACE: Room 104J, Hartman Building, 2012 Capital Circle, Southeast, 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 DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Don Davis, Division of Workers' Compensation, Office of Data Quality and Collection, Department of Financial Services, 200 East Gaines Street, Tallahassee, Florida 32399-4226, (850)413-1711

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

69L-7.602 Florida Workers' Compensation Medical Services Billing, Filing and Reporting Rule Procedures for Non-Hospital Medical Services.

(1) Definitions. As used in this rule:

(a) "Accurately Complete" or "Accurately Completed" means the form submitted contains the information necessary to meet the requirements of Chapter 440, F.S. and this rule. "Carrier is defined in Section 440.13(1)(c), Florida Statutes."

(b) "Agency" means the Agency for Health Care Administration as Division is defined in Section 440.02(3)(12), F.S. Florida Statutes.

(c) "Billing" means the process by which a health care provider submits a claim to an insurer to receive reimbursement for medical services provided to an injured employee. "Emergency services and care" is defined in Section 395.002(9), Florida Statutes.

(d) "Catastrophic Event" means the occurrence of a qualifying event such as a natural disaster, an act of terrorism (including but not limited to cyber terrorism) or a telecommunications failure, in which recovery time will prevent an insurer from meeting the filing requirements of Chapter 440, F.S. and this rule. "Physician" is defined in Section 440.13(1)(r), Florida Statutes.

(e) "Charges" means the dollar amount billed. "Health care provider" means a physician or any recognized practitioner who provides skilled services pursuant to a prescription or under the supervision or direction of a physician and who has been certified by the division as a health care provider. The term "health care provider" includes a health care institution licensed under Chapter 400, Florida Statutes, but does not include any hospital licensed under Chapter 395, Florida Statutes.

(f) "Charge Master" means a comprehensive coded list developed by a hospital or an ambulatory surgical center representing its usual charges for specific services. "Health care facility" means any health care institution licensed under Chapter 400, Florida Statutes, but does not include any hospital licensed under Chapter 395, Florida Statutes.

(g) "Claims Handling Entity" means any insurer, third-party administrator, claim administrator, servicing company, self-serviced self-insured employer or fund, or managing general agent, at any location, who is engaged in the process of adjusting medical claims or submitting workers' compensation reports to the division.

(h) "Current Dental Terminology (CDT-4)" (CDT) means the American Dental Association reference document containing descriptive terms to identify codes for billing and reporting dental procedures.

(i) "Current Procedural Terminology (CPT®)" (CPT) means the American Medical Association reference document (HCPCS Level I) containing descriptive terms to identify codes for billing and reporting medical procedures and services.

(j) "Date Insurer Paid" means the date the insurer or insurer agent mails, transfers or transmits payment to the health care provider.

(k) "Date Insurer Received" means the date that the insurer or insurer agent gains possession of an DWC-9, DWC-10 (or insurer pre-approved alternate form), DWC-11 or DWC-90 or the electronic form equivalent from a provider.

(l) "Deny" means to determine that no payment is to be made for a specific procedure code or other service, reported by a health care provider to an insurer on a bill, because the services are not compensable and therefore not the liability of the insurer.

(m) "Division" means the Division of Workers' Compensation as defined in Section 440.02(14), F.S.

(n) "Disallow" means to determine that no payment is to be made for a specific procedure code or other service, reported by a health care provider to an insurer for reimbursement, based on identification of a billing error, misutilization or over utilization.

(o) "Electronic Filing" means the computer exchange of medical data from an insurer to the division in the standardized format defined in the Medical EDI Implementation Guide.

(p) "Electronic Form Equivalent" means format, provided in the Medical EDI Implementation Guide, to be used when an insurer transmits required data to the division. Electronic form equivalents do not include transmission by facsimile, data file(s) attached to electronic mail, or computer-generated paper-forms.

(q) "Electronically Filed with the Division" means the date an electronic filing has been received by the division and has successfully passed structural and data-quality edits.

(r) "Explanation of Bill Review" (EOBR) means the codes and written explanation of an insurer's reimbursement decision sent to the health care provider.

(s) "Healthcare Common Procedure Coding System National Level II Codes (HCPCS)" (HCPCS) means the Centers for Medicare and Medicaid Services' (CMS) reference document listing descriptive codes for billing and reporting professional services, procedures, and supplies provided by health care providers.

(t) "Health Care Provider" is defined in Section 440.13(1)(h), F.S.

(u) "Hospital" means any health care institution licensed under Chapter 395, F.S.

(v) "ICD-9-CM International Classification of Diseases" (ICD-9) is the U.S. Department of Health and Human Services' reference document listing the official diagnosis and inpatient-procedure code set.

(w) "Insurer" is defined in Section 440.02(38), F.S.

(x) "Insurer Agent" means any entity performing services on behalf of an insurer for the purposes of meeting the requirements of Chapter 440, F.S. or this rule.

(y) "Insurer Code Number" means the number the division assigns each individual insurer, self-insured employer or self-insured fund.

(z) "Itemized Statement" means a detailed listing of hospital provided services and supplies, including the quantity and charges for each service or supply.

(aa) "Medical EDI Implementation Guide" is the Florida Division of Workers' Compensation's reference document containing the specific electronic formats required for insurer reporting of medical data to the division.

(bb) "Medically Necessary" or "Medical Necessity" is defined in Section 440.13(1)(l), F.S.

(cc) "NDC number" means the National Drug Code (NDC) number, assigned under Section 510 of the Federal Food, Drug, and Cosmetic Act, that identifies the drug product labeler/vendor, product, and trade package size.

(dd) "Paper-Form Filed with the Division" means the date a paper document has been received by the division as a required filing under this rule.

(ee) "Preliminary Notice of Injury and Initial Treatment" means the accurately completed DWC-8 submitted to an insurer by the physician rendering initial services, for a work related injury, to fulfill the requirements of Section 440.13(4)(a), F.S.

(ff) "Report" means any form related to medical services rendered, in relation to a workers' compensation injury, that is required to be filed with the division under this rule.

(gg) "UB-92, National Uniform Billing Data Element Specifications as Adopted by the Florida State Uniform Billing Committee" (UB-92 manual) is the reference document providing billing and reporting completion instructions for the DWC-90 (HCFA-1450/UB-92).

(2) Forms for Medical Billing, Filing and Reporting, Emergency Services and Care.

(a) Forms DWC-8 (Preliminary Notice of Injury and Initial Treatment, Rev. 2004), DWC-9 (CMS-1500 Health Insurance Claim Form, Rev. 12/90), DWC-10 (Statement of Charges for Drugs and Medical Supplies Form, Rev. 2004), DWC-11 (American Dental Association Dental Claim Form, Rev. 2002) and DWC-90 (HCFA-1450 Hospital Uniform Bill/UB-92) are hereby incorporated by reference into this rule. In all cases in which a health care provider provides emergency services and care, the health care provider shall notify the carrier by the close of the third business day after providing such emergency services and care. If the emergency services

and care results in admission of the employee to a health care facility, the health care provider shall notify the carrier of same within the 24 hours after initial treatment; or if the carrier is not open for business within that 24 hour period, then within the next 24 hour period of the time that the carrier is open for business.

1. A copy of the DWC-8 and completion instructions can be obtained from the Department of Financial Services/Division of Workers' Compensation (DFS/DWC) web site: <http://www.fldfs.com/WC/forms.html#4L7>.

2. A copy of the DWC-9 can be obtained from the CMS web site: <http://cms.hhs.gov/forms/>. Completion instructions can be obtained from the DFS/DWC web site: <http://www.fldfs.com/WC/forms.html#4L7>.

3. A copy of the DWC-10 and completion instructions can be obtained from the DFS/DWC web site: [www.fldfs.com/WC/forms.html#4L7](http://www.fldfs.com/WC/forms.html#4L7).

4. A copy of the DWC-11 can be obtained by contacting the American Dental Association. Completion instructions can be obtained from the DFS/DWC web site: [www.fldfs.com/WC/forms.html#4L7](http://www.fldfs.com/WC/forms.html#4L7).

5. A copy of the DWC-90 can be obtained from the CMS web site: <http://cms.hhs.gov/forms/>. Completion instructions can be obtained from the DFS/DWC web site: [www.fldfs.com/WC/forms.html#4L7](http://www.fldfs.com/WC/forms.html#4L7).

(b) In lieu of submitting a DWC-10, when billing for drugs or medical supplies, alternate billing forms are acceptable if: The health care provider shall maintain or be able to generate a written record of the above communications, including:

1. An insurer has approved the alternate billing form(s) prior to submission by a health care provider, Date; and

2. The form provides all information required on the DWC-10, Time; and

3. Identity of person sending the communication; and

4. Identity of person or entity receiving the communication; and

5. The mode or method of communication; and

6. The substance of the communication.

(3) Materials Adopted for Reference. The following publications are incorporated by reference herein: Medical bills submitted under the Health Care Provider Reimbursement Schedule, the Ambulatory Surgical Center Reimbursement Schedule, or the Work Hardening or Pain Program Reimbursement Schedule, which schedules are contained within the manuals adopted by reference in Rules 69L 7.020, 69L 7.100 and 69L 7.900, F.A.C., respectively, shall comply with the requirements of this rule.

(a) UB-92, National Uniform Billing Data Element Specifications as Adopted by the Florida State Uniform Billing Committee (Rev. October 2003). Responsibilities of Health Care Providers.

1. Form DWC-8, known as "Notification of Initial Treatment," shall be furnished by the physician, but not by other health care providers, to the carrier within three business days following the injured employee's first treatment. This notice, which may be furnished by facsimile transmission, shall contain the injured employee's identifying information, the date of first visit, preliminary diagnosis, and initial plan of treatment, the injured employee's work status and date of next appointment, the physician's name and DBPR identification number.

2. Providers of medical services shall submit to the carrier a properly completed bill, form DWC 9, known as "Health Insurance Claim Form," or form DWC 11, known as "Dental Health Claim Form," as follows:

a. Within 15 calendar days following the first treatment, accompanied by all medical notes, reports or records.

b. At least every 21 calendar days thereafter for follow-up treatment.

e. Within 21 calendar days following the date of maximum medical improvement.

(b) The Florida Workers' Compensation Medical EDI Implementation Guide, (Effective February 1, 2004). The Medical EDI Implementation Guide can be obtained from the DFS/DWC web site: [http://www.fldfs.com/WC/edi\\_med.html](http://www.fldfs.com/WC/edi_med.html) Responsibilities of Carriers.

1. Carriers shall accept, date stamp on the document front side upon receipt, and within 45 calendar days of receipt pay or deny a legible and complete medical services bill.

2. Carriers shall submit the billing form, DWC 9 or DWC 11, to the Division within 30 calendar days, after the bill has been paid. The filing of bills includes the filing of bills for "lost time" and "medical only" cases.

3. Carriers shall retain any attachment submitted with a DWC-9 or DWC-11, and shall not file any attachment with the Division unless specifically requested.

(c) The Healthcare Common Procedure Coding System National Level II Codes (HCPCS), Centers for Medicare and Medicaid Services, Copyright 2002, American Medical Association.

(d) The Current Procedural Terminology (CPT®), Copyright 2002, American Medical Association.

(e) The Current Dental Terminology (CDT-4), Fourth Edition, Copyright 2002, American Medical Association.

(f) The ICD-9-CM International Classification of Diseases, 9th Revision, Clinical Modification, Copyright 2002, American Medical Association.

(4) Health Care Provider Responsibilities, Pharmacy and Medical Supplier Bills.

(a) A DWC-8, known as the "Preliminary Notice of Injury and Initial Treatment", shall be accurately completed and furnished by the physician (but not by other health care providers) to the insurer within three business days following

the injured employee's first treatment by the physician. The DWC-8 may be submitted by facsimile transmission. Responsibilities of Pharmacists and Medical Suppliers.

1. All pharmacists and medical suppliers who furnish drugs or other medical supplies to an injured worker under the provisions of Chapter 440, Florida Statutes, shall bill the carrier on form DWC 10, known as "Statement of Charges for Drugs and Medical Supplies," or on the pharmacist/medical suppliers' usual billing form. Pharmacist/medical suppliers' usual billing form shall contain all the information required on the DWC 10 and shall not be used for billing purposes until approved by the Division.

a. Required information for pharmacists and medical suppliers includes:

i. The employer's name and address; and

ii. The injured employee's name and social security number; and

iii. The date of accident; and

iv. The carrier's name and address if the employer is not self-insured; and

v. The carrier's case file number, if known; and

vi. The name and address of the pharmacy or other supplier; and

vii. The date of the billing; and

viii. The total charges of billing form; and

ix. The identity of the pharmacist or medical supplier.

b. Required information for pharmacists billing for prescribed drugs includes: dispensing date, new or refill, prescription number, medication name and strength, National Drug Control (NDC) number, quantity dispensed, number of days supplied, reason for use of non-generic drug when applicable, prescribing physician's name and DBPR license number, and usual charge for each medication billed.

e. Required information for pharmacists or medical suppliers billing for medical supplies includes: description of the product or supply, quantity, name(s) of prescribing physician(s) and DBPR license number(s), purchase date and usual charge for each item billed.

2. Pharmacists and medical suppliers shall use the applicable Florida Workers' Compensation Reimbursement Manual for instructions in the completion of the pharmacy and medical supply bills.

3. Pharmacists and medical suppliers shall submit a bill within 30 calendar days of the date the service was provided.

(b) Special Billing Requirements, Responsibilities of Carriers.

1. When anesthesia services are billed on a DWC-9, completion of the form must include the 5-place CPT code and the "P" code (physical status modifier), which correspond with the procedure performed, in Field 24D. Anesthesia health care providers shall enter the date of service and the 5-place qualifying circumstance code, which corresponds with the

procedure performed, in Field 24D on the next line if applicable. Carriers shall accept, date stamp upon receipt and within 30 calendar days of receipt pay or deny a legible and complete pharmacy or medical supplier bill.

2. When an Advanced Registered Nurse Practitioner (ARNP) provides services as a Certified Registered Nurse Anesthetist, he/she shall bill on a DWC-9 for the services rendered and enter his/her Florida Department of Health license number in Field 33. Carriers shall submit the DWC-10 or other billing form or invoice containing the required information in their case file to the Division within 30 calendar days after the bill has been paid.

3. When a licensed physician assistant, therapist or ARNP (not providing an anesthesia related service) is employed by a physician licensed under Chapter 458 or 459, F.S. and renders direct billable services for which reimbursement is sought from an insurer, he/she shall enter his/her Florida Department of Health license number in Field 33 on the DWC-9.

4. For hospital billing, the following special requirements apply:

a. Inpatient billing – hospitals shall, in addition to filing a DWC-90, attach an itemized statement with charges based on the facility’s Charge Master.

b. Outpatient billing:

I. Hospitals shall enter the CPT (HCPCS Level 1) code or unique workers’ compensation code (provided in the Florida Workers’ Compensation Health Care Provider Reimbursement Manual 2004), in Locator 44 on the DWC-90, to bill treatments and procedures pursuant to Section 440.13(12)(b)1., 2., F.S.

II. Supplies shall be billed using HCPCS Level 2 codes in Locator 44 on a DWC-90.

5. Licensed physician assistants and certified first nurse assistants who provide surgical assistance on procedures with codes permitting an assistant surgeon-physician shall bill on a DWC-9 entering the CPT code(s) plus modifier(s), which represent the service(s) rendered, in Field 24D, and must enter their Florida Department of Health license number in Field 33.

6. Ambulatory Surgical Centers (ASCs) shall bill on a DWC-9.

7. Federal Facilities shall bill on their usual forms.

8. Dental Services.

a. Dentists shall bill for services on a DWC-11.

b. Oral surgeons shall bill for oral and maxillofacial surgical services on a DWC-9. Non-surgical dental services shall be billed on a DWC-11.

9. Pharmaceutical and Medical Supplies.

a. Pharmacists and medical suppliers shall bill on a DWC-10 or on an insurer pre-approved alternate form.

b. Dispensing physicians shall bill on a DWC-9 when supplying commercially available medicinal drugs (commonly known as legend or prescription drugs) and shall enter the NDC number in Field 24D.

c. Pharmacists and dispensing physicians shall complete Field 24D on a DWC-9 using the word “compound” when medicinal drugs are compounded and the formulation prescribed is not commercially available.

d. Dispensing physicians shall bill using code 99070 in Field 24D on a DWC-9 when supplying over-the-counter drugs and shall submit an invoice indicating the name, dosage, package size and cost of the drug.

e. Physicians and therapists providing medical supplies shall bill on a DWC-9 using the corresponding HCPCS code or using code 99070 when a corresponding HCPCS codes does not exist. An invoice indicating the cost of the supply, including shipping and handling, and taxes, when applicable, shall be submitted with the DWC-9.

f. Health care providers rendering health care services reimbursable under workers’ compensation, whose billing requirements are not otherwise specified in this rule, shall bill on their invoice or business letterhead.

(c) Bill Completion.

1. Bills shall be legibly and accurately completed by all health care providers, regardless of location or reimbursement methodology, as set forth in this paragraph.

2. Billing elements required by the division to be completed by a health care provider are as follows:

a. Physician and Non-Physician Billing – DWC-9.

(I) Field 1a Injured employee’s social security number or division-assigned number.

(II) Field 2 Injured employee’s name: Last, First, Middle initial, if applicable.

(III) Field 14 Date of current accident, illness or injury.

(IV) Field 16 Dates injured employee is unable to work, as applicable.

(V) Field 19 Injured employee’s work/activity restrictions, as applicable.

(VI) Field 21(1) Diagnosis of primary injury or illness (ICD-9 code).

(VII) Field 21 (2-4) Additional diagnoses (ICD-9 codes).

(VIII) Field 24A Date(s) of service: ‘From’ and ‘To’ date. Multiple dates of service are billable on a single line only if the dates are consecutive. If there is a single date of service, enter the same date in both ‘From’ and ‘To’ fields.

(IX) Field 24B Place of service (2-digit code listed in the CPT manual).

(X) Field 24D Procedure, service or supply code (5-digit CPT, CDT-4, HCPCS, or unique workers’ compensation code plus 2-digit modifier, as applicable).

(XI) Field 24E Diagnosis code reference numbers: ‘1’, ‘2’, ‘3’, ‘4’ refer to corresponding diagnoses listed in Field 21 (1, 2, 3, 4).

(XII) Field 24F Total dollar charges for units billed per line.

(XIII) Field 24G Number of days, hours, units, or quantity of drug or supply must be entered in whole numbers. Total length of anesthesia service time must be entered in minutes.

(XIV) Field 25 Provider's federal tax identification number.

(XV) Field 32 Address where services were rendered including 5-digit zip code.

(XVI) Field 33(PIN#) License number of the professional rendering direct billable service(s) shall enter their Florida Department of Health provider license or rehabilitation facility number assigned by the professional regulatory board, licensing authority or state regulatory agency.

(A) Work Hardening/Pain Programs enter "WC" for required alpha characters (i.e. WC3#####).

(B) Ambulatory Surgical Centers enter "ASC" for required alpha characters (i.e. ASC### or ASC#####).

(C) Independent Laboratories enter "IL" for required alpha characters (i.e. IL8000##### or IL80000##### or IL800000#####).

(D) Advanced Registered Nurse Practitioners enter "ARNP" for required alpha characters (i.e. ARNP##### or ARNP##### or ARNP#####).

(F) Radiology Facilities (providing only the technical component) enter "XX" for required alpha characters and 99999 for required numeric characters (i.e. XX99999).

b. Pharmaceutical/Medical Supplier Billing – DWC-10.

(I) DWC-10 Section 1 – Fields required to be completed by Pharmacy and Medical Supply providers:

(A) Field 1 Injured employee's name: Last, First, Middle Initial, if applicable.

(B) Field 2 Injured employee's social security number or division-assigned number.

(C) Field 3 Date of current accident, injury or illness in MM/DD/CCYY format.

(II) DWC-10 Section 2 – Fields required to be completed by pharmacy providers only:

(A) Field 6 Medication/drug name and strength.

(B) Field 7 Number of tablets, capsules, suppositories, milliliters of liquid, grams of ointment or units of injectable medication.

(C) Field 8 Estimated number of days that medication will last according to prescription dosage and administration instructions.

(D) Field 9 National Drug Code number: manufacturer number, item number, package number; enter "compound" if a compounded drug is dispensed.

(E) Field 10 Pharmacy's internal number assigned to the prescription.

(F) Field 15 Pharmacy's usual charges for the drug. When field 13 is coded, enter the usual charges for the generic equivalent.

(III) DWC-10 Section 3 – Fields required to be completed by Medical Supplier or Pharmacy providing medical supplies:

(A) Field 16 Description or name of item supplied: quantity and size, when applicable.

(B) Field 17 Prescriber's license number assigned by the professional regulatory board or licensing authority.

(C) Field 18 Purchase date in MM/DD/CCYY format.

(D) Field 19 Medical supplier's usual charge for item(s) supplied.

(IV) DWC-10 Section 4 – Fields required to be completed by Pharmacy and Medical Supply providers:

(A) Field 20 Total charges appearing on this statement.

(B) Field 22 Date pharmacy or medical supplier submits statement to insurer for payment in MM/DD/CCYY format.

(C) Field 23 Pharmacist's license number assigned by professional regulatory board or licensing authority.

(D) Field 24 Pharmacy's or medical supplier's federal employer identification number.

c. Dental Billing – DWC-11.

(I) Field 5 Injured employee's name: Last, First, Middle initial, if applicable.

(II) Field 8 Injured employee's social security number or division-assigned number.

(III) Field 54 Dentist's federal tax identification number.

(IV) Field 55 Dentist's Florida Department of Health license number (i.e. DN##### or DN#####).

(V) Field 38 Place of treatment (check appropriate box):

(A) Office.

(B) Hospital.

(C) Extended Care Facility.

(D) Other.

(VI) Field 56 Address where services were rendered, including 5-digit zip code.

(VII) Field 46 Date of current accident, injury or illness.

(VIII) Field 24 Date treatment/service performed.

(IX) Field 29 'Procedure Code' Procedure, service or supply code (5-character CPT, CDT-4 or HCPCS 'D' code).

(X) Field 31 Total dollar charges per line item.

d. Hospital Billing – DWC-90 (Hospitals are to use the UB-92 manual for billing guidelines).

(I) Locator 4 Type of bill.

(II) Locator 5 Hospital's federal tax identification number.

(III) Locator 1 Hospital's location zip code.

(IV) Locator 6 Date statement covers period from/through.

(V) Locator 12 Injured employee's name: Last, First, Middle initial, if applicable.

(VI) Locator 17 Admission date.

(VII) Locator 18 Admission hour.

(VIII) Locator 19 Type of Admission/Visit.

(IX) Locator 21 Discharge hour.

(X) Locator 32 Date of accident, injury or illness.

(XI) Locator 42 Revenue code.

(XII) Locator 44 HCPCS (Level 1 or 2) code or unique workers' compensation code and 2-character modifier(s), as applicable.

(XIII) Locator 46 Number of service units.

(XIV) Locator 47 Total dollar charges billed by revenue code.

(XV) Locator 60A Injured employee's social security number or division-assigned number.

(XVI) Locator 67 Principal diagnosis code (ICD-9 code).

(XVII) Locators 68-75 Other diagnosis codes (ICD-9 codes), as applicable.

(XVIII) Locator 79 Procedure coding method.

(XIX) Locator 80 Principal procedure code; corresponding ICD-9, as applicable.

(XX) Locator 81 (A, B, C, D, E) Other procedure codes corresponding ICD-9, as applicable.

(XXI) Locator 82 Attending physician's Florida Department of Health license number.

3. An insurer can require a health care provider to complete additional data elements that are not required by the division on a DWC-9, DWC-11 or DWC-90.

(d) Provider Bill Submission / Filing and Reporting Requirements.

1. All medical claim forms related to services rendered for a compensable injury shall be submitted by a health care provider to the insurer as a requirement for billing.

2. Medical claim form(s) bill may be electronically filed by a health care provider to the insurer provided the insurer agrees.

3. Billing shall be filed with an insurer within the following time frames:

a. Health Care Providers (excluding hospitals):

Within 30 calendar days of initial or additional service or treatment and accompanied by required documentation that supports medical necessity. This requirement includes Ambulatory Surgical Centers.

b. Hospitals:

(I) Within 30 calendar days following emergency room or initial outpatient treatment.

(II) Within 30 calendar days of an injured employee's discharge from an in-patient hospital stay or provision of follow-up outpatient treatment.

(5) Insurer Responsibilities. Other Health Care Treatment Bills.

(a) An insurer is responsible for meeting its obligations under this rule, regardless of any business arrangements, contracts or subcontracts entered into by an insurer with an insurer agent. Responsibilities of Nursing Homes and Home Health Agencies.

1. Nursing homes and home health agencies shall submit to the carrier a properly completed bill on their usual billing form. This form shall contain the injured employee's name, social security number, and date of accident and be sent as follows:

a. Within 45 calendar days after admission or the first service is provided; and

b. At least every 30 calendar days thereafter until such time as the injured employee is discharged; and

e. Within 21 calendar days of final service.

2. Home health agencies shall submit documentation of each visit billed with their usual billing form.

(b) Upon authorization of medical service(s), an insurer shall notify a health care provider of additional requirements that are necessary for reimbursement in excess of the requirements set forth in this rule. Responsibilities of Other Authorized Health Care Providers or Facilities.

1. Other authorized health care providers or facilities shall submit to the carrier a properly completed bill on their usual billing form. This billing form shall contain the injured employee's name, social security number and date of accident and must be sent as follows:

a. Within 15 calendar days following the first treatment or admission.

b. At time intervals designated by the carrier for follow-up treatment.

e. Within 21 calendar days following the final treatment.

2. Federal Facilities. Federal facilities are exempt from all billing guidelines and shall submit their charges for services rendered on their usual billing form.

(c) When authorizing medical services, an insurer shall inform an out-of-state health care provider of the specific billing and submission requirements of this rule. Responsibilities of Carriers.

1. Carriers shall accept, date stamp on the document front side upon receipt, and within 45 calendar days of receipt pay or deny a legible and complete bill.

2. Carriers shall retain all bills in the category of "other health care treatment bills" and shall not file them with the Division unless specifically requested.

(d) Required data elements on the DWC-9, DWC-10, DWC-11, and DWC-90, for both medical only and lost-time cases, shall be reported to the division within 30 calendar days of insurer payment, adjustment and payment, disallowance or denial.

(e) An insurer shall be responsible for the accurately completed required data filed with the division, pursuant to the Medical EDI Implementation Guide and sub-paragraph (4)(c)2. of this rule.

(f) When an injured employee does not have a social security number or division-assigned number, the insurer must contact the division via information provided on the following

website: <http://www.fldfs.com/WC/organization/odqc.html> (under Records Management) to obtain a division-assigned number prior to submitting the report to the division.

(g) An insurer shall attach an accurately completed cover sheet to each paper-form batch submitted to the division.

(h) An insurer must report to the division the procedure, diagnosis or modifier code(s) or amount(s) charged, as billed by the health care provider.

(i) An insurer shall date stamp the DWC-9, DWC-10 (or insurer pre-approved alternate form), DWC-11, DWC-90 or time stamp the electronic form equivalent with the date insurer received.

(j) An insurer shall pay, adjust and pay, disallow or deny billed charges within 45 calendar days from the date insurer received, pursuant to Section 440.20(2)(b), F.S.

(k) An insurer, when reporting paid medical claims data to the division, shall report the actual dollar amount paid to the health care provider or reimbursed to the employee. On disallowed charges, the dollar amount should be reported as \$0.00.

(l) An insurer shall submit to the division the Explanation of Bill Review (EOBR) code(s), relating to the adjudication of each line item billed and:

1. Maintain the EOBR in a format that can be legibly reproduced, and

2. Use the EOBR codes and descriptors as follows:

a. 01 Services not authorized, as required.

b. 02 Services denied as not related to a compensable injury.

c. 03 Services related to a denied case: DWC-12 on file with the division.

d. 04 Services billed are listed as not covered or non-covered ("NC") in the applicable reimbursement manual.

e. 05 Documentation does not support the level, intensity or duration of service(s) billed. (Insurer must specify.)

f. 06 Location of service(s) is not consistent with the level of service(s) billed.

g. 07 Reimbursement equals the amount billed.

h. 08 Reimbursement is based on the applicable reimbursement schedule.

i. 09 Reimbursement is based on the contracted amount.

j. 10 Reimbursement is based on charges exceeding the stop-loss point.

k. 11 Reimbursement is based on insurer re-coding. (Insurer must specify.)

l. 12 Charge(s) are included in the per diem reimbursement.

m. 13 Reimbursement is included in the allowance of another service. (Insurer must specify procedure.)

n. 14 Hospital itemized statement not submitted with billing form.

o. 15 Incorrect billing form filed. (Insurer must specify correct form.)

p. 16 Invalid procedure code.

q. 17 Illegible or incomplete bill. (Insurer must specify.)

r. 18 Documentation does not support that services rendered were medically necessary.

s. 19 Required supplemental documentation not filed with the bill. (Insurer must specify required documentation.)

t. 20 Duplicate Billing: Service previously paid, adjusted and paid, disallowed or denied on prior claim form or multiple billing of service(s) billed on same date of service.

u. 21 Other: Unique EOBR code description. Use of EOBR code "21" is restricted to circumstances when a listed EOBR code does not explain the reason for adjustment, disallowance or denial of payment. When using EOBR code "21", an insurer must include the specific explanation of the code and maintain a standardized EOBR code description list.

(m) An insurer shall make available to the division and to the Agency, upon request and without charge, a legibly reproduced copy of the DWC-8, DWC-9, DWC-10 (or insurer pre-approved alternate form), DWC-11, DWC-90, supplemental documentation, proof of payment, EOBR and/or standardized EOBR code "21" description list.

(n) An insurer shall submit to the health care provider an Explanation of Bill Review including the insurer name and specific insurer contact information.

(6) Insurer Medical Report (Electronic Format or Paper-form) Filing To The Division Bills Prepared by Billing Services.

(a) Effective August 1, 2004, required medical reports shall be electronically filed with the division by all insurers. In meeting this requirement an insurer shall comply with the following implementation schedule, as applicable: Responsibilities of the Authorized Health Care Provider. Any health care provider using a billing service shall comply with all applicable sections of this rule.

1. Insurers who are electronically filing medical reports with the division, as of the effective date of this rule, must complete a transmission test to meet the requirements set forth in the Medical EDI Implementation Guide according to the following schedule:

a. March 1, 2004 through March 31, 2004 testing will include insurers or insurer agents with names beginning with the letters A through E.

b. April 1, 2004 through April 30, 2004 testing will include insurers or insurer agents with names beginning with the letters F through Z.

2. Insurers who are paper-document filing with the division, as of May 1, 2004, must, in order to meet the test transmission requirements set forth in the Medical EDI Implementation Guide, begin to complete transmission testing according to the following schedule:

a. May 1, 2004 through May 31, 2004 testing will include insurers with division-assigned insurer code numbers 102 through 538.

b. June 1, 2004 through June 30, 2004 testing will include insurers with division-assigned insurer code numbers 539 through 7999.

c. July 1, 2004 through July 31, 2004 testing will include insurers with division-assigned insurer code numbers 8000 through 9999.

(b) Required data elements shall be submitted in compliance with the instructions and formats as set forth in the Medical EDI Implementation Guide. Responsibilities of the Billing Service. The form used for billing completed by the billing service shall comply with all applicable sections of this rule.

(c) The division will notify the insurer on the Claim Processing Report of the corrections necessary for rejected medical reports to be “electronically filed with the division”. An insurer shall correct and re-file all rejected medical claim reports. Responsibilities of Carriers.

1. Carriers shall accept, date stamp on the document front side upon receipt, and pay or deny a legible and complete bill in accordance with all applicable sections of this rule.

2. Carriers shall retain the billing form or submit to the Division in accordance with all applicable sections of this rule.

(d) Catastrophic events resulting in data-transmission or total system failure after July 31, 2004 may qualify an insurer to file paper-forms to meet division-reporting requirements for a period not to exceed 30 calendar days. Prior to insurer initiation of paper-form filing, written approval must be obtained from the Division’s Office of Data Quality and Collection, 200 E. Gaines Street, Tallahassee, Florida 32399-4226.

(e) Between the effective date of this rule and July 31, 2004 required medical reports may be paper-form filed with the division by an insurer as follows:

1. With the insurer code number accurately and legibly entered in the upper-right corner on the form.

2. With the date insurer paid legibly stamped on the front of the form. Payments of \$0.00 are valid amounts on disallowed charges.

3. With the required data elements as set forth in record layout sections of the Medical EDI Implementation Guide. An insurer shall submit to the division the listed information, legibly entered on the paper-form, as follows:

a. DWC-9.

I. “Explanation of Bill Review Code” – entered in Field 24 H, I, J;

II. “Procedure, Service or Supply Code” (as paid by the insurer, if different from billed code) – entered in Field 24 D<sub>1</sub> without obscuring the billed code;

IV. “Insurer Payment per Line” entered in Field 24 K.III. “Procedure, Service or Supply Code Modifier” (as paid by the insurer, if different from billed modifier) – entered in Field 24 D<sub>2</sub> without obscuring the billed modifier;

V. Additional data elements required pursuant to the Medical EDI Implementation Guide may be entered on the form, location to be determined by the insurer.

b. DWC-10.

I. “Explanation of Bill Review Code” – entered in Field 10 or 16, respectively;

II. “Insurer Payment per Line” – written above the ‘Usual Charge’ in Field 15 or 19, respectively;

III. Additional data elements required pursuant to the Medical EDI Implementation Guide may be entered on the form, location to be determined by the insurer.

c. DWC-11.

I. “Explanation of Bill Review Code” – entered in Field 27;

II. “Insurer Payment per Line” – entered in Field 30 following description;

III. Additional data elements required pursuant to the Medical EDI Implementation Guide may be entered on the form, location to be determined by the insurer.

d. DWC-90.

I. “Explanation of Bill Review Code” entered in Locator 43 following the entered ‘description’;

II. “HCPCS/RATES” code (as paid by the insurer, if different from billed code) enter the reimbursed code above the billed code;

III. “HCPCS/RATES” code modifier (as paid by the insurer, if different from billed modifier) enter the reimbursed modifier above the billed modifier;

IV. “Insurer Payment per Line” entered in Locator 49;

V. Additional data elements required pursuant to the Medical EDI Implementation Guide may be entered on the form, location to be determined by the insurer.

4. In order to facilitate the division’s responsibility to determine the timeliness of health care provider reimbursement and submission of medical reports to the division, reports submitted in paper-form must be submitted in batches and each batch must be accompanied with a cover sheet and the following requirements:

a. DWC-9, DWC-10 (or insurer pre-approved alternate form), DWC-11 or DWC-90 forms shall be separated by form type into 100-count batches prior to submitting to the division. Insurers processing less than 100 forms in 30 calendar days shall separate form types and submit batches of less than 100.

b. Within each submitted paper-form batch, the insurer shall separate and band into groups, medical reports as being untimely paid to a provider or untimely reported to the division pursuant to Section 440.20(6)(b), F.S. and paragraph (5)(d) of this rule, respectively.

c. Every submitted paper-form batch shall be accompanied by a cover sheet providing the following information:

I. The title shall read "Medical Paper-Form Submission Cover Sheet".

II. The date the batch was submitted to the division shall be specified.

III. The insurer name, address including zip code of the medical claim office submitting the batch, and division-assigned number shall be specified.

IV. The insurer contact name, telephone number and email address shall be specified.

V. The report type (DWC-9, DWC-10, DWC-11 or DWC-90) shall be specified.

VI. The total number of medical reports in each batch submitted to the division shall be specified.

VII. The total number of medical reports filed with the division more than 30 calendar days after the insurer payment, adjustment and payment, disallowance or denial shall be specified.

VIII. The total number of medical reports reflecting medical bills that were paid to the provider more than 45 calendar days from the date insurer received.

d. Every paper batch which is not accompanied by an accurately completed cover sheet will be returned to an insurer or an insurer agent, and considered not in compliance with paragraph (5)(d) of this rule, until re-filed with an accurately completed cover sheet.

5. All required medical reports (DWC-9, DWC-10, DWC-11 or DWC-90) shall be submitted to the division at:

Department of Financial Services  
Division of Workers' Compensation  
Office of Data Quality and Collection, Medical Data Management Section  
200 East Gaines Street  
Tallahassee, FL 32399-4226.

(7) Insurer Penalties and Administrative Fines Co-Payments. Except for emergency services and care, after the injured employee has reached overall maximum medical improvement, the injured employee is obligated to pay a co-payment of \$10 per visit for medical services. The co-payment is not in addition to any applicable maximum reimbursement allowance, but displaces or offsets \$10 from the reimbursement amount otherwise reimbursed by the carrier.

(a) Insurer Penalties for Untimely Provider-Payment of Medical Bills. The department shall impose insurer penalties for failure to comply with the payment, adjustment and payment, disallowance, or denial requirements pursuant to Section 440.20(6)(b), F.S.

(b) Insurer Administrative Fines for Untimely Submission, Filing and Reporting of Medical Data Requirements.

1. Pursuant to Section 440.185(9), F.S., the department shall impose insurer administrative fines for failure to comply with the submission, filing or reporting requirements of this rule.

2. Insurer administrative fines shall be imposed for each un-filed or untimely-filed medical report according to the following schedule:

- a. 1 – 15 days late \$10.00
- b. 16 – 30 days late \$20.00
- c. 31 – 45 days late \$30.00
- d. 46 – 60 days late \$40.00
- e. 61 – 75 days late \$50.00
- f. 76 – 90 days late \$100.00
- g. 91 days or greater \$500.00

(8) If the carrier is submitting forms DWC-9, DWC-10, and/or DWC-11 to the Division on electronic media, and retaining the forms on electronic media, the carrier is not required to retain paper copies of those forms, but may treat the electronic media as the original documentation.

(9) On forms DWC-9, DWC-10, and DWC-11, the carrier shall be responsible for the legibility, accuracy and completeness of only the social security number, date of accident, and those areas of the form that the carrier completes. The carrier shall not be penalized for the legibility, accuracy or completeness of any area of the form completed by the employer, injured employee, or health care provider.

(10) Forms DWC-8, DWC-9, DWC-10, and DWC-11 are hereby incorporated into this rule and Rule Chapter 4L-7 by reference. Forms DWC-8, DWC-10, and DWC-11 shall bear the date September 1, 1994 in the lower right hand corner of the forms and shall become effective on the effective date of this rule. Form DWC-9 shall bear the date December 1990 in the lower right hand corner of the form and shall become effective on the effective date of this rule. A copy of forms DWC-8, DWC-9, DWC-10, and DWC-11 may be obtained by sending a request to the Division of Workers' Compensation, Medical Data Section, 200 East Gaines Street, Tallahassee, Florida 32399-4230.

Specific Authority 440.13(4)(a),(b), 440.525(2), 440.591, 440.593(5) FS. Law Implemented 440.09, 440.13(2)(a),(3),(4),(6),(7),(11),(12),(14), 440.20(6), 440.185(5),(9) FS. History—New 1-23-95, Formerly 38F-7.602, 4L-7.602, Amended \_\_\_\_\_.