

Section I
Notices of Development of Proposed Rules
and Negotiated Rulemaking

DEPARTMENT OF EDUCATION

State Board of Education

RULE TITLE: Course Requirements – Grades 6-12 Basic and Adult Secondary Programs

RULE NO.: 6A-1.09412

PURPOSE AND EFFECT: The purpose of the rule development is to review the current course descriptions to ensure that reading courses are clearly articulated. The effect will be the addition and/or deletion of course descriptions relating to reading.

SUBJECT AREA TO BE ADDRESSED: Course Descriptions.

SPECIFIC AUTHORITY: 1011.62(1)(r) FS.

LAW IMPLEMENTED: 1011.62 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. – 12:00 Noon, May 9, 2005

PLACE: Ballroom A, Rosen Center Hotel, 9840 International Drive, Orlando, Florida

Requests for the rule development workshop should be addressed to: Lynn Abbott, Agency Clerk, Department of Education, 325 West Gaines Street, Room 1514, Tallahassee, Florida 32399-0400.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Mary Laura Openshaw, Director, Just Read

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

DEPARTMENT OF TRANSPORTATION

RULE CHAPTER TITLE: Bid Guaranty for Construction Contracts

RULE CHAPTER NO.: 14-21

RULE TITLE: Bid Guaranty for Construction Contracts

RULE NO.: 14-21.001

PURPOSE AND EFFECT: The statute only requires bid guarantee for construction contracts in excess of \$150,000.00. The rule is amended to remove any reference to maintenance contracts.

SUBJECT AREA TO BE ADDRESSED: Rule 14-21.001, F.A.C., is being amended to remove reference to maintenance contracts.

SPECIFIC AUTHORITY: 334.044(2), 337.17 FS.

LAW IMPLEMENTED: 337.17 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:

14-21.001 Bid Guaranty for Construction ~~and Maintenance~~ Contracts.

(1) Scope. This rule defines the security acceptable as bid guaranty for construction ~~and maintenance~~ contracts.

(2) Guaranty Required. The Department shall require a guaranty with each bid for a construction contract in excess of 150,000 in an amount of 5% of the amount of the bid.

Specific Authority 334.044(2), 337.17 FS. Law Implemented 337.17 FS. History—Amended 5-9-70, Formerly 14-7.01, Amended 7-9-75, Formerly 14-21.01, Amended 3-21-90, _____.

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.”

WATER MANAGEMENT DISTRICTS

Southwest Florida Water Management District

RULE CHAPTER TITLE: Individual Environmental

RULE CHAPTER NO.: 40D-4

Resource Permits

RULE TITLES: Exemptions

RULE NOS.: 40D-4.051

Publications and Agreements

Incorporated by Reference

40D-4.091

Additional Conditions for Issuance of Permits

40D-4.302

PURPOSE AND EFFECT: The purpose and effect of this rulemaking is to amend Rules 40D-4.051, 40D-4.091 and 40D-4.302, F.A.C. and section 3.2.2 of the Environmental Resource Permitting Basis of Review to conform to statutory changes and to be consistent with the Florida Department of Environmental Protection’s and the other water management districts environmental resource permitting rules.

SUBJECT AREA TO BE ADDRESSED: Environmental Resource Permitting rules. The rules being updated include Rule 40D-4.051, F.A.C., which lists the activities that are exempt from permitting, and Rule 40D-4.302, F.A.C., which

lists additional conditions for issuance of permits. Inconsistencies were also identified in Section 3.2.2 of the Environmental Resource Permitting Information Manual, Part B, Basis of Review.

SPECIFIC AUTHORITY: 373.016, 373.044, 373.046, 373.113, 373.118, 373.171, 373.414 FS.

LAW IMPLEMENTED: 373.016, 373.042, 373.0361, 373.114, 373.171, 373.403, 373.406, 373.409, 373.413, 373.414, 373.414(9), 373.416, 373.426, 373.429, 373.441 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 District does not discriminate on the basis of disability. Anyone requiring reasonable accommodation should contact: Dianne Lee, (352)796-7211, Ext. 4658, TDD only 1(800)231-6103

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT IS: Karen E. West, Deputy General Counsel, Office of General Counsel, 2379 Broad Street, Brooksville, FL 34604-6899, (352)796-7211, Extension 4651

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS AVAILABLE AT NO CHARGE FROM THE CONTACT PERSON LISTED ABOVE.

AGENCY FOR HEALTH CARE ADMINISTRATION

Division of Managed Care and Health Quality

RULE CHAPTER TITLE: Minimum Standards for

RULE CHAPTER NO.: 59A-4

Nursing Homes

RULE TITLES: Licensure, Administration and

RULE NOS.: 59A-4.103

Fiscal Management

Facility Policies

Physician Services

Medical Director

Nursing Services

Assistance with Eating

Resident Assessment and Care Plan

Dietary Services

Pharmacy Services

Medical Records

Physical Environment

Risk Management and Quality Assurance

Liability Claims

Disaster Preparedness

Evaluation of Nursing Homes

and Licensure Status

Respite Care

Exception

Additional Standards for Homes That Admit Children 0 Through 20 Years of Age	59A-4.1295
Fire Prevention, Fire Protection, and Life Safety	59A-4.130
Plans Submission and Review and Construction Standards	59A-4.133
Geriatric Outpatient Nurse Clinic	59A-4.150
Nursing Home Guide	59A-4.165
Nursing Home Consumer Satisfaction Survey	59A-4.166
Definitions	59A-4.200
Gold Seal Award	59A-4.201
Quality of Care	59A-4.202
Financial Requirements	59A-4.203
Turnover Ratio	59A-4.204
The State Long Term Care Ombudsmen Council Review	59A-4.205
Termination and Frequency of Review	59A-4.206

PURPOSE AND EFFECT: The Agency proposes to amend Chapter 59A-4, F.A.C., consistent with the provisions of Chapter 400, Part II, Florida Statutes (F.S.). The legislation provides for licensure procedures; establishing criteria for facility policies; establishing criteria of physician services, medical director and nursing services; establishing an assistance with eating program; amending resident assessment and care plan; establishing dietary services; amending pharmacy services; amending medical records; establishing risk management and quality assurance; documentation for liability claims; amending criteria when evaluating nursing homes and licensure status; establishing respite care program; amending exceptions; establishing additional standards for homes that admit children 0 through 20 years of age; amending fire prevention, fire protection and life safety; amending plans submission and review and construction standards; establishing criteria pertaining to geriatric outpatient nurse clinics; amending criteria regarding the nursing home guide; and deleting the nursing home consumer satisfaction survey.

SUBJECT AREAS TO BE ADDRESSED: The proposed changes to Chapter 59A-4, Florida Administrative Code include: methodology for withdrawing licenses issued when licensure fees are returned to the agency due to insufficient funds and criteria for requesting an inactive license for all or part of a facility. (Rule 59A-4.103, F.A.C.); stating criteria of a do not resuscitate order (DNRO) (Rule 59A-4.106, F.A.C.); posting names of direct staff on duty by shift and share programming and staff of Gold Seal facilities and facilities with a standard license that are part of a continuing care facility or a retirement community (Rule 59A-4.108, F.A.C.); establish new rules involving assistance with eating (Rule 59A-4.1085, F.A.C.); stating criteria of the Director of Food Service (Rule 59A-4.110, F.A.C.); adverse incident reporting (Rule 59A-4.123, F.A.C.); establishing methodology regarding liability claims (Rule 59A-4.1235, F.A.C.); deleting reference of deficiencies as measured in terms of scope and severity (Rule 59A-4.128, F.A.C.); establish new rules involving

respite care (Rule 59A-4.1285, F.A.C.); stating criteria in the area of exceptions (Rule 59A-4.1288, F.A.C.); setting criteria when expanding or initiating services to pediatric residents (Rule 59A-4.1295, F.A.C.); amending criteria for pharmacy services; amending criteria relating to fire prevention, life safety, plans submission and construction standards deleting various definitions (Rule 59A-4.150, F.A.C.); setting a time period (Rule 59A-4.165, F.A.C.); and deleting reference to a nursing home consumer satisfaction survey (Rule 59A-4.166, F.A.C.); and makes technical corrections throughout.

SPECIFIC AUTHORITY: 400.23 FS.

LAW IMPLEMENTED: 400.11, 400.022, 400.141, 400.142, 400.23 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., May 12, 2005

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Richard Kelly, Long Term Care Unit, 2727 Mahan Drive, Tallahassee, Florida, (850)488-5861

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT WILL BE MADE AVAILABLE PRIOR TO THE RULE WORKSHOP.

AGENCY FOR HEALTH CARE ADMINISTRATION

Medicaid

RULE TITLE: Prescription Drug Coverage Denials

RULE NO.: 59G-4.255

PURPOSE AND EFFECT: The purpose of this rule amendment is to establish procedures that will expedite the access to fair hearings for eligible Medicaid recipients with cognizable prescription drug claims and to assure full and meaningful compliance with federal and state law. These procedures are also pursuant to a federal court order in Anthony Hernandez v Rhonda Medows, 02-20964 (US District Court, Southern District of FL).

The rule requires Medicaid-participating pharmacies to provide a pamphlet, which is incorporated by reference, to Medicaid recipients whose prescription drug claims are denied by Medicaid. The pharmacy must enter in the pamphlet, the date, the recipient's name, drug name, and reason for the denial or attach a printout of the computer screen stating the reason for the denial. In addition, Medicaid-participating pharmacies must post a sign informing recipients of a toll-free number that can be called if a prescription is denied and the pharmacy failed to provide the denial information and information pamphlet to the recipient.

The rule requires Medicaid recipients who dispute their prescription denials to contact the Medicaid pharmacy Ombudsman for assistance in resolving the dispute before requesting a fair hearing. The rule also requires recipients to request fair hearings for prescription denials in writing.

SUBJECT AREA TO BE ADDRESSED: Prescription Drug Coverage Denials.

SPECIFIC AUTHORITY: 409.919 FS.

LAW IMPLEMENTED: 409.906 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: 2:00 p.m., Monday, May 9, 2005

PLACE: Agency for Health Care Administration, 2727 Mahan Drive, Bldg. 3, Conference Room B, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: Karen Girard, Agency for Health Care Administration, Medicaid Services, 2727 Mahan Drive, Mail Stop 20, Tallahassee, Florida 32308, (850)488-9711

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

59G-4.255 Prescription Drug Coverage Denials.

(1) Medicaid-participating pharmacies shall provide the pamphlet, Important Information About Your Florida Medicaid Prescription Drug Benefits (April 2005), which is incorporated by reference, to Medicaid recipients whose prescription drug claims are denied by Medicaid and the pharmacy cannot resolve the denial during that day's pharmacy visit. The pharmacy must write on the pamphlet, the date, the recipient's name, the drug name, and the reason for the denial or attach a printout of the computer screen stating the reason for the denial. The pamphlets are available from the Agency for Health Care Administration's website at <http://ahca.myflorida.com>.

(2) Medicaid-participating pharmacies shall post two signs, one in English and one in Spanish, informing recipients of a toll-free number that can be called if the prescription is denied and the pharmacy failed to provide the denial information and the Important Information About Your Florida Medicaid Prescription Drug Benefits pamphlet to the recipient. The signs must be approved by the Agency for Health Care Administration.

(3) Notwithstanding any other provisions of Rule 65-2.045, F.A.C., et seq., the following provisions apply to the fair hearing process for Medicaid recipients who have a denied prescription:

(a) The recipient must contact the Medicaid pharmacy Ombudsman for assistance in resolving the denial before requesting a fair hearing.

(b) The recipient must request the fair hearing in writing. The hearing request can be on the Fair Hearing Request Form contained in the Important Information About Your Florida Medicaid Prescription Drug Benefits pamphlet or by another written request that contains the same information that is on the Fair Hearing Request Form. The recipient or his authorized representative must enter the name of the drug, the reason for denial, the date of the denial, the reason(s) for requesting a hearing, and sign the form or written request.

(c) If the denial was because the drug required prior authorization, the recipient must attach evidence that his doctor tried to get prior authorization.

(d) If a fair hearing form or written request is incomplete, the Department of Children and Families, Office of Appeals Hearings must send a written notice of rejection of the hearing request to the recipient within ten days. The notice must state the reason the hearing request was rejected. An exception shall be granted if the request is related to prior authorization denials for prescriptions identified as clinical protocol drugs by the Agency for Health Care Administration.

(e) Recipients do not have the right to a fair hearing under the following circumstances:

1. The recipient has not made reasonable efforts as defined in the final order issued in Hernandez v Rhonda Medows, 02-20964 (US District Court, Southern District of FL) to resolve rejection of his drug claim;

2. The prescription drug rejection was due to lack of prior authorization, there is no dispute about whether the drug requires prior authorization, and there is not evidence included with the hearing request that the prescriber tried to obtain prior authorization.

3. If the recipient is challenging the legality of a restriction set forth in a federal Medicaid statute or regulation or state Medicaid statute or rule rather than a factual dispute arising from application of the statute;

4. If the rejection is for an early refill and there is no dispute over whether the refill was in fact early;

5. If the prescription is legally invalid pursuant to any state or federal statute that specifies the legal content of a prescription, and only the prescriber (who must be licensed and authorized to do so) can correct the prescription to make it legally valid and refuses to do so; or

6. If the pharmacy is not enrolled as a Medicaid provider; or in the case of an HMO member, the pharmacy is not a participating provider in the HMO.

Specific Authority 409.919 FS. Law Implemented 409.906 FS. History—New

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Division of Alcoholic Beverages and Tobacco

RULE CHAPTER TITLE: General
 RULE CHAPTER NO.: 61A-2

RULE TITLE: Approved Forms
 RULE NO.: 61A-2.019

PURPOSE AND EFFECT: The purpose and effect of the proposed rule is to outline the required forms needed for alcoholic beverages and tobacco related compliance.

SUBJECT AREA TO BE ADDRESSED: The list of forms used by the Department of Business and Professional Regulation, Division of Alcoholic Beverages and Tobacco in its dealing with the public.

SPECIFIC AUTHORITY: 120.53(1)(b) FS.

LAW IMPLEMENTED: 120.53 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: Renee Alsbrook, Chief Attorney, Department of Business and Professional Regulation, Division of Alcoholic Beverages and Tobacco, Office of the General Counsel, 1940 North Monroe Street, Suite 42, Tallahassee, Florida 32399, (850)487-9677

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

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Veterinary Medicine

RULE TITLE: Complementary or Alternative
 RULE NO.: 61G18-19.002

PURPOSE AND EFFECT: The Board proposes a new rule to address the definition of and the requirements for the use of complementary and alternative veterinary practices.

SUBJECT AREA TO BE ADDRESSED: The nature of complementary and alternative therapies based on techniques in practices including acupuncture, homeopathy, osteopathy, chiropractic medicine, nutraceutical and physiotherapy practices; and, the responsibilities of the veterinarian to communicate the use of alternative therapies to the owner of the patient.

SPECIFIC AUTHORITY: 474.206 FS.

LAW IMPLEMENTED: 474.202(13) 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: Juanita Chastain, Executive Director, Board of Veterinary Medicine, Northwood Centre, 1940 N. Monroe Street, Tallahassee, Florida 32399-0750

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

61G18-19.002 Complementary or Alternative Veterinary Medicine.

(1) Definition – Complementary, alternative and integrative therapies means a heterogenous group of preventive, diagnostic and therapeutic philosophies and practices, which at the time they are performed may differ from current scientific knowledge, or whose theoretical basis and techniques may diverge from veterinary medicine routinely taught in accredited veterinary medical colleges, or both. These therapies include, but are not limited to, veterinary acupuncture, acutherapy and acupressure, veterinary homeopathy, veterinary manual or manipulative therapy (i.e., therapies based on techniques practiced in osteopathy, chiropractic medicine, or physical medicine and therapy); veterinary nutraceutical therapy and veterinary physiotherapy.

(2) Communication of treatment alternatives – A license veterinarian who offers to provide a patient with complementary or alternative health care treatment must inform the owner of the patient of the nature of the treatment and must explain the benefits and risks associated with the treatment to the extent necessary for the owner to make an informed and prudent decision regarding such treatment option. In compliance with this subsection:

(a) The licensed veterinarian must inform the owner of his or her education, experience and credentials in relation to veterinary complementary or alternative health care treatment option.

(b) The licensed veterinarian may, in his or her discretion, communicate the information orally or in written form directly to the owner or to the owner's legal representative.

(c) The licensed veterinarian may, in his or her discretion and without restriction, recommend any mode of treatment that is, in his or her judgment, in the best interests of the patient, including complementary or alternative health care treatments, in accordance with the provisions of his or her license.

(3) Records – Every licensed veterinarian providing a patient with a complementary or alternative health care treatment must indicate in the patient's record the method by which the requirements of subsection (2) were met.

(4) Effect – This section does not modify or change the scope of practice of any licensed veterinarian, nor does it alter in any way the provisions of Chapter 474, F.S., which require licensees to practice within standards of care, and which prohibit fraud and exploitation of clients.

Specific Authority 474.206 FS. Law Implemented 474.202(13) FS. History–New _____.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Accountancy

RULE TITLE: _____ RULE NO.: _____
Fees 61H1-31.001

PURPOSE AND EFFECT: The Board proposes to review this Rule to determine if any additions, deletions, fee increases or decreases are necessary.

SUBJECT AREA TO BE ADDRESSED: Fees.

SPECIFIC AUTHORITY: 455.213(2), 455.219(4), 455.271, 473.305, 473.312 FS.

LAW IMPLEMENTED: 119.07, 455.219(4), 455.271, 473.305, 473.312, 473.313 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: John W. Johnson, Executive Director, Board of Accountancy, 240 N. W. 76th Drive, Suite A, Gainesville, Florida 32607

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

61H1-31.001 Fees.

(1) Applicants to sit for the Uniform CPA Examination, as a first time candidate or for candidates transferring partial credits from another state, a fifty dollar (\$50.00) application fee will be owed prior to processing the application. Once the applicant has been approved to sit for the exam as a Florida candidate; the following initial examination fee will be charged to take each section of the exam: Auditing ~~\$159.25~~ ~~\$134.50~~, Accounting ~~\$148.00~~ ~~\$126.00~~, Regulation ~~\$125.50~~ ~~\$109.00~~, and Business E & C ~~\$114.25~~ ~~\$100.50~~.

(2) through (12) No change.

Specific Authority 455.213(2), 455.219(4), 455.271, 473.305, 473.312 FS. Law Implemented 119.07, 455.219(4), 455.271, 473.305, 473.312, 473.313 FS. History–New 12-4-79, Amended 2-3-81, 3-4-82, 11-6-83, 3-29-84, Formerly 21A-31.01, Amended 6-4-86, 9-16-87, 2-1-88, 8-30-88, 2-6-89, 12-18-89, 12-28-89, 8-16-90, 4-8-92, 12-2-92, Formerly 21A-31.001, Amended 11-04-93, 2-14-95, 11-3-97, 6-22-98, 10-28-98, 7-15-99, 4-4-02, 1-27-04, 1-31-05, _____.

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: RULE NO.:

Medical Records of Physicians Relocating
or Terminating Practice; Retention,
Disposition, Time Limitations 64B8-10.002

PURPOSE AND EFFECT: The Board has authorized the development of a rule amendment to require medical records to be retained for a period of 7 years.

SUBJECT AREA TO BE ADDRESSED: Retention of medical records.

SPECIFIC AUTHORITY: 456.058, 458.309 FS.

LAW IMPLEMENTED: 456.058 FS.

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

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:

64B8-10.002 Medical Records of Physicians Relocating or Terminating Practice; Retention, Disposition, Time Limitations.

- (1) through (2) No change.
- (3) A licensed physician shall keep adequate written medical records, as required by Section 458.331(1)(m), Florida Statutes, for a period of at least seven ~~five~~ years from the last patient contact.
- (4) No change.

Specific Authority 456.058, 458.309 FS. Law Implemented 456.058 FS. History--New 7-3-89, Formerly 21M-26.002, Amended 11-4-93, 1-17-94, Formerly 61F6-26.002, Amended 1-26-97, Formerly 59R-10.002, Amended 3-7-01, _____.

DEPARTMENT OF HEALTH

Board of Pharmacy

RULE TITLES: RULE NOS.:

Definitions – Nuclear Pharmacy 64B16-28.900
Nuclear Pharmacy – Minimum Requiriements 64B16-28.902

PURPOSE AND EFFECT: The purpose of the amendment to Rule 64B16-28.900, F.A.C., is to remove the reference to Rule 64B16-28.903, F.A.C., as it has been repealed and is now referenced to Rule 64B16-26.303, F.A.C. The purpose to the amendment to Rule 64B16-28.902, F.A.C., is to add the effective dates for clarification of Chapters and Regulations for use within the rules.

SUBJECT AREA TO BE ADDRESSED: The amendment to Rule 64B16-28.900, F.A.C., removes the reference to Repealed Rule 64B16-28.903, F.A.C., and replaces with the reference to Rule 64B16-26.303, F.A.C. Amendment to Rule 64B16-28.902, F.A.C., adds effective dates for clarification of Chapters and Regulations for use within the rules.

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

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

SPECIFIC AUTHORITY: 465.005, 465.022 FS.

LAW IMPLEMENTED: 465.003(14), 465.0193, 465.002(1), 465.022(1)(e) FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT IS: Danna Droz, Executive Director, Board of Pharmacy/MQA, 4052 Bald Cypress Way, Bin #C04, Tallahassee, Florida 32399

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

- 64B16-28.900 Definitions – Nuclear Pharmacy.
 - (1) No change.
 - (2) A “nuclear pharmacist” is an actively licensed pharmacist who has met the training qualifications as described in Rule 64B16-26.303 ~~64B16-28.903~~, F.A.C., and has been certified by the Board of Pharmacy.
 - (3) through (6) No change.

Specific Authority 465.005 FS. Law Implemented 465.003(14), 465.022(1)(e) FS. History--New 1-7-76, Formerly 21S-3.01, Amended 4-4-88, Formerly 21S-3.001, Amended 7-31-91, 4-15-92, 10-1-92, Formerly 21S-28.900, 61F10-28.900, 59X-28.900, Amended _____.

64B16-28.902 Nuclear Pharmacy – Minimum Requirements.

In order to insure compliance with the general safety requirements as previously set forth above, the following minimum requirements shall be met by a nuclear pharmacy. These requirements are in addition to the general requirements for space and equipment for other types of pharmacies, the requirements of the Department of Health for the control of

radiation hazards, and the applicable requirements of the Federal Food and Drug Administration. Such minimum permit requirements are set forth as follows:

- (1) through (3)(f) No change.
- (4) Current references:
 - (a) through (c) No change.
 - (d) Chapters 64B16-26 and 64B16-28, F.A.C., Rules of the Florida Board of Pharmacy in effect as of April 1, 2005;
 - (e) Chapter 64E-5, F.A.C., Rules of the Department of Health in effect as of April 1, 2005;
 - (f) Title 10 C.F.R., Code of Federal Regulations, FDA Regulations in effect as of April 1, 2005;
 - (g) Title 21 C.F.R., Code of Federal Regulations, FDA Regulations in effect as of April 1, 2005;
 - (h) Title 49 C.F.R., Code of Federal Regulations, Department of Transportation Regulations in effect as of April 1, 2005;
 - (i) through (j) No change.

Specific Authority 465.005, 465.022 FS. Law Implemented 465.0193, 465.022(1) FS. History--New 1-7-76, Formerly 21S-3.04, Amended 12-11-86, 4-4-88, Formerly 21S-3.004, Amended 7-31-91, Formerly 21S-28.902, 61F10-28.902, Amended 2-26-95, Formerly 59X-28.902, Amended 4-26-01, _____.

DEPARTMENT OF HEALTH

Optical Establishments

RULE TITLE: Optical Establishment Inspection
 RULE NO.: 64B29-1.002
 PURPOSE AND EFFECT: The Department of Health proposes to amend the rule addressing matters pertaining to optical establishment inspections.
 SUBJECT AREA TO BE ADDRESSED: Optical establishment inspections.
 SPECIFIC AUTHORITY: 484.007, 484.014, 484.015 FS.
 LAW IMPLEMENTED: 484.007, 484.014, 484.015 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: Sue Foster, Executive Director, Department of Health, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

- 64B29-1.002 Optical Establishment Inspection.
 - (1) through (2)(c) No change.
 - 1. Whether prescriptions written by an optometrist, allopathic or osteopathic a physician ~~or optometrist~~, for any lenses, spectacles, eyeglasses, contact lenses, or other optical devices are kept on file for a period of 2 years; and
 - 2. No change.
 - (d) through (f) No change.

Specific Authority 484.007, 484.014, 484.015 FS. Law Implemented 484.007, 484.014, 484.015 FS. History--New 5-27-03, Amended _____.

DEPARTMENT OF FINANCIAL SERVICES

Division of Workers' Compensation

RULE TITLE: Conditional Release of Stop Work Order and Periodic Payment Agreement
 RULE NO.: 69L-6.025
 PURPOSE AND EFFECT: The purpose and effect is to amend existing Rule 69L-6.025, F.A.C., which sets forth procedures for the Division of Workers' Compensation to conditionally release an employer from a stop-work order upon a finding that the employer has complied with the coverage requirements of Chapter 440, Florida Statutes, and has agreed to remit periodic payments of the penalty pursuant to a payment agreement schedule. The proposed amendment will allow employers that have been assessed a penalty greater than \$1000 up to sixty months to pay the remaining penalty regardless of the amount of the remaining penalty.
 SUBJECT AREA TO BE ADDRESSED: Stop-work orders and periodic payment of penalties under Section 440.107, F.S.
 SPECIFIC AUTHORITY: 440.107(9), 440.591 FS.
 LAW IMPLEMENTED: 440.107(7)(a) 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: 9:00 a.m., May 10, 2005
 PLACE: 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: Andrew Sabolic, Bureau Chief, Bureau of Compliance, Division of Workers' Compensation, Department of Financial Services, 200 East Gaines Street, Tallahassee, Florida 32399-4228, (850)413-1600

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

69L-6.025 Conditional Release of Stop Work Order and Periodic Payment Agreement.

(1) The requirements for issuance of an Order of Conditional Release From Stop Work Order as provided for in Section 440.107, F.S. are:

(a) The employer has come into compliance with the coverage requirements of Chapter 440, F.S. Compliance with the coverage requirements of Chapter 440, F.S. includes demonstration by the employer that it is no longer failing to secure the payment of compensation within the meaning of Section 440.107, F.S.

(b) The employer and the Department have executed a Payment Agreement Schedule for Periodic Payment of Penalty, Form Number DFS-F4-1600 (rev. 7/04).

(c) The employer agrees to file probationary periodic reports with the Department for a time period that does not exceed 2 years that demonstrate the employer's continued compliance with Chapter 440, F.S. The probationary periodic reports shall be filed as a section of each monthly payment installment invoice pursuant to the Payment Agreement Schedule for Periodic Payment of Penalty.

(2) The terms and conditions of a Payment Agreement Schedule for Periodic Payment of Penalty shall be:

(a) The employer shall make a down payment on the total assessed penalty amount to the Department that is the greater of \$1000.00 or at least 10% of the total assessed penalty amount. The amount constituting the total assessed penalty amount, less the down payment, shall be referred to as the "remaining penalty".

(b) Each monthly payment installment is due on the first day of the month in which it is due, and the employer is in violation of the Payment Agreement Schedule for Periodic Payment of Penalty if the full monthly payment installment is not received by the Department by the last day of the month in which the payment installment is due;

1. ~~The An employer whose remaining penalty is less than \$13,500,~~ shall pay the remaining penalty in up to sixty ~~twelve~~ consecutive monthly installments.

~~2. An employer whose remaining penalty is \$13,500 or greater shall pay the remaining penalty in twenty-four consecutive monthly installments.~~

~~2.3.~~ The employer may at any time pre-pay the installments of the remaining penalty, which have not become due.

~~3.4.~~ The first monthly payment installment shall be due on the first day of the second month following the month of issuance of the Conditional Release From Stop Work Order, Form Number DFS-F4-1602 (rev. 6/04), and each subsequent payment installment shall be due on the first day of each consecutive month.

(c) Monthly payment installments shall only be remitted to the Department's address designated in the Payment Agreement Schedule for Periodic Payment of Penalty.

(d) Monthly payment installments shall be in the form of a cashier's check or money order only, made payable to the DFS-Workers' Compensation Administration Trust Fund.

(e) If the employer is a corporation, only an officer of the corporation may execute the Payment Agreement Schedule For Periodic Payment of Penalty on behalf of the employer.

(f) If the employer is a business entity other than a corporation, any principal of the business entity may execute the Payment Agreement Schedule For Periodic Payment of Penalty on behalf of the employer.

(g) Failure by the employer to meet or violation of any term or condition of the Payment Agreement Schedule For Periodic Payment of Penalty shall constitute a default by the employer.

(3) The Payment Agreement Schedule For Periodic Payment of Penalty becomes effective when it is executed on behalf of the employer and by the Department. Upon execution of the Payment Agreement Schedule For Periodic Payment of Penalty, the Department will provide the employer with a Monthly Payment Installment Invoice, Form Number DFS-F4-1601 (rev. 8/04), which shall be submitted with each monthly payment installment. Each Monthly Payment Installment Invoice contains a probationary reporting section that shall be completed by the employer.

(4) If an employer defaults under any of its obligations under the Payment Agreement Schedule For Periodic Payment of Penalty, the Stop Work Order to which the penalty applies shall be immediately reinstated and the entire unpaid balance of the remaining penalty shall immediately become due and payable.

(5) The Department hereby adopts and incorporates the following forms by reference. Copies of the forms can be obtained from the Division of Workers' Compensation's Bureau of Compliance, 200 East Gaines Street, Tallahassee, Florida 32399-4228, or from any field office identified in Rule 69L-6.009, F.A.C.

(a)	DFS-F4-1600	Payment Agreement Schedule For Periodic Payment of Penalty	rev. 7/04
(b)	DFS-F4-1601	Monthly Payment Installment Invoice	rev. 8/04
(c)	DFS-F4-1602	Order of Conditional Release From Stop-Work Order	rev. 6/04

Specific Authority 440.107(9), 440.591 FS. Law Implemented 440.107(7)(a) FS. History—New 4-6-05, Amended _____.

DEPARTMENT OF FINANCIAL SERVICES

Division of Workers’ Compensation

RULE TITLE: Florida Workers’ Compensation Medical Services Billing, Filing and Reporting Rule
 RULE NO.: 69L-7.602

PURPOSE AND EFFECT: The amendments clarify rule language and data reporting requirements, amend an administrative penalty dollar amount to a decreased value for untimely medical bill reporting to the division, amend the form DFS-F5-DWC-25, and its completion instructions, update form completion instructions for forms DFS-F5-DWC-09, DFS-F5-DWC-10, DFS-F5-DWC-11, and to incorporate the recommendations of Florida’s Worker’s Compensation Three-Member Panel that affect medical health care provider billing procedures for implant devices, prosthetics, and orthotics.

SUBJECT AREA TO BE ADDRESSED: Reimbursement of healthcare providers that provide medical services for workers’ compensation claimants.

SPECIFIC AUTHORITY: 440.13(4), 440.15(3)(b),(d), 440.185(5), 440.525(2), 440.591, 440.593(5) FS.

LAW IMPLEMENTED: 440.09, 440.13(2)(a),(3),(4),(6),(11), (12),(14),(16), 440.15(3)(b),(d), 440.20(6), 440.185(5),(9), 440.593 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: 9:00 a.m., May 13, 2005
 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.

(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.

(b) “Agency” means the Agency for Health Care Administration as defined in Section 440.02(3), F.S.

(c) “Ambulatory Surgical Center” is defined in Section 395.002(3), F.S.

(d)(e) “Billing” means the process by which a health care provider submits a claim to an insurer, service company/third party administrator (TPA) or any entity acting on behalf of the insurer, to receive reimbursement for medical services provided to an injured employee.

(e)(d) “Catastrophic Event” means the occurrence of an event outside the control of an insurer, ~~or~~ submitter, service company/third party administrator (TPA) or any entity acting on behalf of the insurer, 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, ~~or~~ submitter, service company/third party administrator (TPA) or any entity acting on behalf of the insurer from meeting the filing and reporting requirements of Chapter 440, F.S., and this rule.

(f)(e) “Charges” means the dollar amount billed.

(g)(f) “Charge Master” means a comprehensive coded list developed by a hospital or an ambulatory surgical center representing the ~~its~~ usual charges for specific services and/or supplies.

(h)(g) “Claims-Handling Entity File Number” means the number assigned to the claim file by the insurer ~~or~~ service company/ ~~or~~ third party administrator (TPA) for purposes of internal tracking.

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

(j)(i) “Date Insurer Paid” means the date the insurer, service company/~~;~~ third party administrator (TPA), ~~or~~ submitter or any entity acting on behalf of the insurer mails, transfers or electronically transmits payment to the health care provider.

(k)(j) “Date Insurer Received” means the date that a Form DFS-F5-DWC-9, DFS-F5-DWC-10 (or insurer pre-approved alternate form), DFS-F5-DWC-11, DFS-F5-DWC-90 or the electronic form equivalent is delivered to, and manually or electronically date stamped by; the insurer, service company/~~;~~ third party administrator (TPA), ~~or~~ submitter or any entity acting on behalf of the insurer ~~from a provider~~.

~~(l)(k)~~ “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, service company/TPA or any entity acting on behalf of the insurer on a bill.

~~(m)(l)~~ “Division” means the Division of Workers’ Compensation (DWC) as defined in Section 440.02(14), F.S.

~~(n)(m)~~ “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, service company/TPA or any entity acting on behalf of the insurer for reimbursement, based on identification of a billing error, inappropriate utilization or over utilization, use of an incorrect billing form, only one line-item billed and the bill has an invalid code, or required information is missing or illegible.

~~(o)(n)~~ “Electronic Filing” means the computer exchange of medical data from a submitter to the division in the standardized format defined in the Florida Workers’ Compensation Medical EDI Implementation Guide (MEIG), 20054.

~~(p)(o)~~ “Electronic Form Equivalent” means the format, provided in the Florida Workers’ Compensation Medical EDI Implementation Guide (MEIG), 20054, to be used when a submitter electronically 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)(p)~~ “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)~~ “Entity” means any party, involved in the provision of or the payment for medical services, care or treatment rendered to the injured employee, excluding the insurer, service company/third party administrator (TPA) or health care provider as identified in this section.

~~(s)(q)~~ “Explanation of Bill Review” (EOBR) means the codes and written explanation of an insurer’s reimbursement decision sent to the health care provider as payment, notice of denial, disallowance or adjustment.

~~(t)(r)~~ “Florida Workers’ Compensation Medical EDI Implementation Guide (MEIG), 20054” is the Florida Division of Workers’ Compensation’s reference document containing the specific electronic formats and data elements required for insurer reporting of medical data to the division.

~~(u)(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.

~~(v)(t)~~ “Health Care Provider” is defined in Section 440.13(1)(h), F.S.

~~(w)(u)~~ “Hospital” is defined in Section ~~means any health care institution licensed under Chapter 395.002(13), F.S.~~

~~(x)(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 sets.

~~(y)(w)~~ “Insurer” is defined in Section 440.02(38), F.S.

~~(z)(x)~~ “Insurer Code Number” means the number the division assigns to each individual insurer, self-insured employer or self-insured fund.

~~(aa)(y)~~ “Itemized Statement” means a detailed listing of ~~hospital-provided~~ services and supplies provided to an injured employee, including the quantity and charges for each service or supply.

~~(bb)~~ “Itemized Invoice” means a document substantiating the actual cost, including applicable manufacturer’s shipping and handling, paid by the provider for medically necessary devices, items, or products.

~~(z)~~ “Medical Summary Report” ~~means an Excel spreadsheet format that denotes an insurer, service company or third party administrator payment, adjustment and payment, disallowance or denial information.~~

~~(cc)(aa)~~ “Medically Necessary” or “Medical Necessity” is defined in Section 440.13(1)(l), F.S.

~~(dd)(bb)~~ “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.

~~(ee)~~ “Paper Form Filed with the Division” ~~means the date a paper document is accurately completed, postmarked and mailed pre-paid to the Department of Financial Services as a required filing under this rule.~~

~~(ee)(dd)~~ “Physician” is defined in Section 440.13(1)(q), F.S.

~~(ff)(ee)~~ “Physician’s Current Procedural Terminology (CPT®)” (CPT) means the American Medical Association’s reference document (HCPCS Level I) containing descriptive terms to identify codes for billing and reporting medical procedures and services.

~~(gg)(ff)~~ “Principal Physician” means the treating physician responsible for the oversight of medical care, treatment and attendance rendered to an injured employee, to include recommendation for appropriate consultations or referrals.

~~(hh)(gg)~~ “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.

~~(ii)(hh)~~ “Service Company/Third Party Administrator (TPA)” means an party that entity which has contracted with an insurer for the purpose of providing all services necessary to adjust workers’ compensation claims on the insurer’s behalf.

~~(jj)(ii)~~ “Service Company/Third Party Administrator (TPA) Code Number” means the number the division assigns to each third party administrator, claims administrator or servicing company.

~~(kk)(jj)~~ “Submitter” means an insurer, service company/~~or third party administrator (TPA), entity~~ or any other party entity acting as an agent or vendor on behalf of an insurer, service company/~~or (TPA) third party administrator, or entity~~ to fulfill any insurer responsibility to electronically transmit required medical data to the division.

~~(mm)(kk)~~ “UB-92, National Uniform Billing Data Element Specifications as Adopted by the Florida State Uniform Billing Committee, March May 2005” (UB-92 manual) is the reference document providing billing and reporting completion instructions for the Form DFS-F5-DWC-90 (UB-92 HCFA-1450, Uniform Bill, Rev.1992/UB-92).

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

(a) Form DFS-F5-DWC-9 (CMS -1500 Health Insurance Claim Form, Rev. 12/90), Form DFS-F5-DWC-9 – A, Rev. January 19, 2005, Form DFS-F5-DWC-10 (Statement of Charges for Drugs and Medical Supplies Form, Rev. 03/21/2005~~4~~), Form DFS-F5-DWC-11 (American Dental Association Dental Claim Form, Rev. 2002), Form DFS-F5-DWC-11– A, Rev. January 19, 2005, Form DFS-F5-DWC-25 (Florida Workers’ Compensation Uniform Medical Treatment/Status Reporting Form, Rev. 1/19/2005 03/2004), Form DFS-F5-DWC-25 completion instructions, Rev. January 19, 2005, and Form DFS-F5-DWC-90 (UB-92 HCFA-1450, Hospital Uniform Bill, Rev. UB-92, Effective 1992) ~~and completion instructions for these forms~~ are hereby incorporated by reference into this rule.

1. A copy of the Form DFS-F5-DWC-9 can be obtained from the CMS web site: <http://www.cms.hhs.gov/forms/>. Completion instructions can be obtained from the DFS/DWC web site: <http://www.fldfs.com/WC/forms.html#7>.

2. A copy of the Form DFS-F5-DWC-10 and completion instructions can be obtained from the DFS/DWC web site: <http://www.fldfs.com/WC/forms.html#7>.

3. A copy of the Form DFS-F5-DWC-11 can be obtained by contacting the American Dental Association. Completion instructions can be obtained from the DFS/DWC web site: <http://www.fldfs.com/WC/forms/html#7>.

4. A copy of the Form DFS-F5-DWC-25 and completion instructions can be obtained from the DFS/DWC web site: <http://www.fldfs.com/WC/forms.html#7>.

5. A copy of the Form DFS-F5-DWC-90 can be obtained from the CMS web site: <http://www.cms.hhs.gov/forms/>. Completion instructions can be obtained from the UB-92, National Uniform Billing Data Element Specifications as Adopted by the Florida State Uniform Billing Committee (Rev. March 2005) and subparagraph (4)(d)5. of this rule ~~DFS/DWC web site: <http://www.fldfs.com/WC/forms.html#7>~~.

(b) In lieu of submitting a Form DFS-F5-DWC-10, when billing for drugs or medical supplies, alternate billing forms are acceptable if:

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

2. The form provides all information required on the Form DFS-F5-DWC-10. Forms DFS-F5-DWC-9, DFS-F5-DWC-11 or DFS-F5-DWC-90 shall not be submitted as an alternate form.

(3) Materials Adopted for Reference. The following publications are incorporated by reference herein:

(a) UB-92, National Uniform Billing Data Element Specifications as Adopted by the Florida State Uniform Billing Committee (Rev. March May 20054). A copy of this manual can be obtained from the Florida Hospital Association.

(b) The Florida Workers’ Compensation Medical EDI Implementation Guide (MEIG), 2005~~4~~. Florida Workers’ Compensation Medical EDI Implementation Guide (MEIG), 2005~~4~~ can be obtained from the DFS/DWC web site: http://www.fldfs.com/WC/edi_med.html.

(c) The American Medical Association “Healthcare Common Procedure Coding System, Medicare’s National Level II Codes (HCPCS), as adopted in Rule 69L-7.020, F.A.C. Centers for Medicare and Medicaid Services, Copyright 2003, American Medical Association.”

(d) The Physicians’ Current Procedural Terminology (CPT®), as adopted in Rule 69L-7.020, F.A.C. Copyright 2003, American Medical Association.”

(e) The Current Dental Terminology (CDT-4), as adopted in Rule 69L-7.020, F.A.C., Fourth Edition Copyright 2003, American Dental Association.”

(f) The ICD-9-CM International Classification of Diseases, 9th Revision, Clinical Modification, Copyright 2003, American Medical Association.

(g) The American Medical Association’s Guide to the Evaluation of Permanent Impairment, ~~3rd Edition, (AMA Guide) (Copyright 1988 by the American Medical Association)~~, as adopted incorporated in Rule 69L-7.604, F.A.C.

(h) The Minnesota Department of Labor and Industry Disability Schedule, as adopted incorporated in Rule 69L-7.604, F.A.C.

(i) The Florida Impairment Rating Guide, as adopted incorporated in Rule 69L-7.604, F.A.C.

(j) The 1996 Florida Uniform Permanent Impairment Rating Schedule, as adopted incorporated in Rule 69L-7.604, F.A.C.

(4) Health Care Provider Responsibilities.

(a) All providers are responsible for meeting their obligations, under this rule, regardless of any business arrangement with any entity under which claims are prepared, processed or submitted to the insurer.

~~(b)(*)~~ Insurers and providers shall utilize only the Form DFS-F5-DWC-25 for physician reporting of the injured employee's medical treatment/status. Any other reporting forms may not be used in lieu of or supplemental to the Form DFS-F5-DWC-25.

1. The Form DFS-F5-DWC-25 does not replace physician notes, medical records or division-required medical billing reports.

2. All information submitted on physician notes, medical records or division-required medical billing reports must be consistent with information documented on the Form DFS-F5-DWC-25.

~~(c)(b)~~ Special Billing Requirements.

1. When anesthesia services are billed on a Form DFS-F5-DWC-9, completion of the form must include the 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-digit qualifying circumstance code, which correspond with the procedure performed, in Field 24D on the next line, if applicable.

2. When an Advanced Registered Nurse Practitioner (ARNP) provides services as a Certified Registered Nurse Anesthetist, he/she shall bill on a Form DFS-F5-DWC-9 for the services rendered and enter his/her Florida Department of Health license number in Field 33, regardless of the employment arrangement under which the services were rendered, or the party submitting the bill.

3. When a licensed physician or licensed non-physician health care provider, including physician assistant or ARNP (not providing an anesthesia-related service) 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 Form DFS-F5-DWC-9, regardless of the employment arrangement under which the services were rendered or the party submitting the bill.

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

a. Inpatient billing – Hospitals shall, in addition to filing a Form DFS-F5-DWC-90;

I. Attach an itemized statement with charges based on the facility's Charge Master, and-

II. Attach an itemized invoice that documents the hospital's actual cost of the implant, prosthetic or orthotic devices or items, including applicable manufacturer's shipping and handling, when applicable, and

III. Use appropriate revenue codes, pursuant to Rule 69L-7.501, F.A.C. when billing implant, prosthetic or orthotic devices or items.

b. Outpatient billing: – Hospitals shall, in addition to filing a Form DFS-F5-DWC-90:

I. Hospitals shall enter the CPT, HCPCS, or unique workers' compensation code (provided in the Florida Workers' Compensation Health Care Provider Reimbursement Manual, 2005~~4~~ Edition), in Locator 44 on the Form DFS-F5-DWC-90, to bill outpatient radiology, clinical laboratory and/or physical, occupational or speech therapy charges treatments.

II. Enter a surgical CPT code in Locator 44 when billing outpatient surgery or surgical services.

~~III.H. Hospitals shall~~ enter the date of service on Form DFS-F5-DWC-90, in Locator 45, for outpatient billing.

~~IV.HI. Hospitals shall bill supplies by filing a Form DFS-F5-DWC-90 and~~ attaching an itemized statement with charges based on the a facility's Charge Master if there is no line item detail shown on the Form DFS-F5-DWC-90.

V. Attach an itemized invoice that documents the hospital's actual cost of implant, prosthetic or orthotic devices or items, including applicable manufacturer's shipping and handling, and

VI. Use appropriate revenue codes, pursuant to Rule 69L-7.501, F.A.C. when billing implant, prosthetic or orthotic devices or items.

5. Licensed physician assistants and certified ~~first~~ first nurse assistants who provide surgical assistance on procedures with codes permitting an assistant surgeon-physician shall bill on a Form DFS-F5-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 in addition to filing bill on a Form DFS-F5-DWC-9;-

a. Attach an itemized statement with charges based on the facility's Charge Master.

b. Attach an itemized invoice that documents the ASC's actual cost of implant, prosthetic or orthotic devices or items, including applicable manufacturer's shipping and handling.

7. Federal Facilities shall bill on their usual form.

8. Dental Services.

a. Dentists shall bill for services on a Form DFS-F5-DWC-11.

b. Oral surgeons shall bill for oral and maxillofacial surgical services on a Form DFS-F5-DWC-9. Non-surgical dental services shall be billed on a Form DFS-F5-DWC-11.

c. Dentists and oral surgeons shall submit, to the insurer, service company/TPA or any entity acting on behalf of the insurer, a copy of an itemized invoice documenting the actual cost of implant devices or items, including applicable manufacturer's shipping and handling.

9. Pharmaceutical and Medical Supplies.

a. Pharmacists and medical suppliers shall bill on a Form DFS-F5-DWC-10 or on an insurer pre-approved alternate form. Forms DFS-F5-DWC-9, DFS-F5-DWC-11 or DFS-F5-DWC-90 shall not be submitted as an alternate form.

b. Pharmacists shall complete Field 9, on a Form DFS-F5-DWC-10, by entering the unique workers' compensation code 96371 ~~word "COMPOUND"~~ when medicinal drugs are compounded and the formulation prescribed is not commercially available.

c. Dispensing physicians, physician assistants or ARNPs shall bill on a Form DFS-F5-DWC-9, when supplying commercially available medicinal drugs (commonly known as legend or prescription drugs) and shall enter the NDC number in Field 24D.

Optionally, the unique workers' compensation code 96370 may be entered in addition to the NDC code, in Field 24D.

d. When administering or supplying injectable drugs, the physician, physician assistant or ARNP shall bill on a Form DFS-F5-DWC-9 and enter the appropriate HCPCS "J" code in Field 24D.

~~e.~~ Dispensing physicians, physician assistants or ARNPs shall complete Field 24D, on a Form DFS-F5-DWC-9, by entering the unique workers' compensation code 96371 when medicinal drugs are compounded and the formulation prescribed is not commercially available.

~~f.~~ Dispensing physicians, physician assistants or ARNPs shall bill by entering code 99070 in Field 24D, on a Form DFS-F5-DWC-9, when supplying over-the-counter drugs and shall submit an itemized invoice indicating the name, dosage, package size and cost of the drug(s).

~~g.~~ Physicians and other licensed health care providers providing medical supplies shall bill on a Form DFS-F5-DWC-9 and attach an itemized invoice documenting indicating the actual cost of the supply, including applicable manufacturer's shipping and handling and taxes, when applicable.

10. Physicians billing for a failed appointment for a scheduled independent medical examination (when the injured employee does not report to the physician office as scheduled) shall bill on their invoice or letterhead.

~~11.~~ Health care providers and other insurer authorized providers rendering health care services reimbursable reimbursable under workers' compensation, whose billing requirements are not otherwise specified in this rule, shall bill on their invoice or business letterhead.

~~(d)~~(e) 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 identified in specific DFS-F5-DWC-9 completion instructions – A, available at the following websites as follows:

a. <http://www.fldfs.com/wc/pdf/DWC-9instrHCP.pdf> when submitted by Licensed Health Care Providers;

b. <http://www.fldfs.com/wc/pdf/DWC-9instrASC.pdf> when submitted by Ambulatory Surgical Centers;

c. <http://www.fldfs.com/wc/pdf/DWC-9instrWHPM.pdf> when submitted by Work Hardening and Pain Management Programs.

~~Physician and Non-Physician/Certified Provider Billing—Form DFS-F5-DWC-9.~~

~~(I) Field 1a Injured employee's Social Security Number or division-assigned number (obtained from the Insurer).~~

~~(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 21(1) Diagnosis of primary injury or illness (Include decimal in ICD-9 code, as applicable).~~

~~(VI) Field 21 (2-4) Additional diagnoses (Include decimal in ICD-9 code, as applicable).~~

~~(VII) 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.~~

~~(VIII) Field 24B Place of service (as listed in the CPT manual).~~

~~(IX) Field 24D Procedure, service or supply code (CPT, CDT 4, HCPCS, NDC or unique workers' compensation code plus modifier, as required for reimbursement).~~

~~(X) Field 24E Diagnosis code reference numbers: '1', '2', '3', '4' refer to corresponding diagnoses listed in Field 21 (1, 2, 3, 4).~~

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

~~(XII) 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.~~

~~(XIII) Field 25 Federal tax identification number.~~

~~(XIV) Field 32 Zip code where services were rendered.~~

~~(XV) Field 33 (PIN#) License number of the health care provider rendering direct billable service(s): Providers shall enter their Florida Department of Health provider license, out of state license, or other facility number as 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. WC#####).~~

~~(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#####, IL80000##### or IL800000#####).~~

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

(E) Radiology or Other Facilities (providing only the technical component) enter “XX” for required alpha characters and 9999999999 for required numeric characters (i.e. XX9999999999).

3. Billing elements required by the division to be completed for Pharmaceutical or Medical Supplier Billing are identified in specific DFS-F5-DWC-10 completion instructions available at website: <http://www.fldfs.com/wc/pdf/DWC-10.pdf>.

b. Pharmaceutical/Medical Supplier Billing — Form DFS-F5-DWC-10.

(I) Form DFS-F5-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 (obtained from the insurer).

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

(II) Form DFS-F5-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) Form DFS-F5-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 Florida Department of Health license number. If the prescriber is not licensed by the Florida Department of Health, enter the license number assigned by the appropriate jurisdictional 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) Form DFS-F5-DWC-10 Section 4 — Fields required to be completed by Pharmacy and Medical Supply providers:

(A) Field 20 Total dollar 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.

4. Billing elements required by the division to be completed for Dental Billing are identified in specific DFS-F5-DWC-11 completion instructions – A, available at website: <http://www.fldfs.com/WC/forms.html#7>.

e. Dental Billing — Form DFS-F5-DWC-11.

(I) Field 20 Injured employee’s name: Last, First, Middle initial, if applicable.

(II) Field 8 Injured employee’s Social Security Number or Division assigned number (obtained from the insurer).

(III) Field 51 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 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 (CPT, CDT-4 or HCPCS ‘D’ code).

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

5. Billing elements required by the division to be completed for Hospital Billing are identified in the UB-92 Manual and as follows:

a. Locators 39-41 ZIP Code of the physical location where services were rendered.

(I) Locator 1 Hospital’s location zip code.

(II) Locator 4 Type of bill.

(III) Locator 5 Federal tax identification number.

(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, if applicable.

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

(XI) Insurer name, address and location zip code.

(XII) Locator 42 Revenue code.

~~(XIII) Locator 44 CPT, HCPCS, or unique workers' compensation code and modifier(s), as required for reimbursement.~~

~~(XIV) Locator 45 Date of Service, required for outpatient billing.~~

~~(XV) Locator 46 Number of service units.~~

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

~~(XVII) Locator 60A Injured employee's Social Security Number or Division assigned number (obtained from the insurer).~~

~~(XVIII) Locator 67 Principal diagnosis code (ICD-9 code).~~

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

~~(XX) Locator 80 Principal procedure code, as applicable.~~

~~(XXI) Locator 81 (A, B, C, D, E) Other procedure codes, as applicable.~~

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

6.3. An insurer can require a health care provider to complete additional data elements that are not required by the division on Forms DFS-F5-DWC-9 or DFS-F5-DWC-11.

~~(e)(4)~~ Provider Bill Submission/Filing and Reporting Requirements.

1. All medical claim form(s) or bill(s) related to services rendered for a compensable injury shall be submitted by a health care provider to the insurer, service company/TPA or any entity acting on behalf of the insurer, as a requirement for billing.

2. Medical claim form(s) or bill(s) may be electronically filed by a health care provider to the insurer, service company/TPA or any entity acting on behalf of the insurer, provided the insurer agrees.

3. Medical claim form(s) or bill(s) shall be filed with an insurer, service company/TPA or any entity acting on behalf of the insurer, according to the following requirements:

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 Pharmacies, Medical Suppliers, and 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 follow-up outpatient treatment.

(5) Insurer Responsibilities.

(a) An insurer is responsible for meeting its obligations under this rule regardless of any business arrangements with any service company/TPA, submitter or any entity acting on behalf of an insurer under which claims are adjusted, processed or submitted to the division.

(b) At the time of authorization for medical service(s), an insurer shall notify a health care provider of additional form completion requirements or supporting documentation from the medical record that are necessary for reimbursement in excess of the requirements set forth in this rule. Copies of hospital medical records shall be subject to charges allowed pursuant to Section 395.3025, F.S.

(c) At the time of authorization for medical service(s), an insurer shall inform an out-of-state health care provider of the specific reporting, billing and submission requirements of this rule.

(d) Insurers and providers shall utilize only the Form DFS-F5-DWC-25 for physician reporting of an injured employee's medical treatment /status, and Any other reporting forms may not be used in lieu of or supplemental to the Form DFS-F5-DWC-25.

(e) Required data elements on Forms DFS-F5-DWC-9, DFS-F5-DWC-10, DFS-F5-DWC-11, and DFS-F5-DWC-90, for both medical only and lost-time cases, shall be filed with the division within 45 calendar days of insurer, service company/TPA or any entity acting on behalf of the insurer, payment, adjustment and payment, disallowance or denial. This 45 calendar day requirement includes initial submission and correction and re-submission of all errors identified in the "Medical Claim Processing Report", as defined in the Florida Workers' Compensation Medical EDI Implementation Guide (MEIG), 20054.

(f) An insurer shall be responsible for accurately completing required data filed with the division, as of the effective date of this rule, pursuant to the Florida Workers' Compensation Medical EDI Implementation Guide (MEIG), 20054 and subparagraphs (4)(d)(e)2.-5. of this rule.

(g) 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.

~~(h) An insurer shall attach an accurately completed cover sheet, as required in subparagraph (6)(f)4. of this rule, to each paper form batch submitted to the division.~~

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

~~(i)(j)~~ An insurer, service company/TPA or any entity acting on behalf of the insurer shall manually or electronically date stamp Forms DFS-F5-DWC-9, DFS-F5-DWC-10 (or

insurer pre-approved alternate form), DFS-F5-DWC-11, DFS-F5-DWC-90 or a submitter shall date stamp the electronic form equivalent with the date insurer received.

~~(j)(4)~~ An insurer, service company/TPA or any entity acting on behalf of the insurer shall return any bills to the provider, with a written explanation, when: services are billed on an incorrect billing form; an invalid code is used and is the only line-item billed; or required information is illegible or not provided.

~~(k)(4)~~ 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.

~~(l)(4)~~ An insurer, service company/TPA or any entity acting on behalf of the insurer, when reporting paid medical claims data to the division, shall report the ~~actual~~ dollar amount paid by the insurer for the healthcare service(s) or supply(ies) to the health care provider or directly reimbursed to the employee for medically necessary service(s) or supply(ies). When reporting ~~On~~ disallowed or denied charges, the dollar amount paid ~~shall~~ should be reported as \$0.00.

~~(m)~~ An insurer shall not report as medical payment data, those payments made for failed appointments for scheduled independent medical examinations.

~~(n)~~ A ~~submitter~~ insurer, filing electronically, 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 the compensable work injury.
 - c. 03 Services related to a denied work injury: Form DFS-F2-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 to the provider.)
 - 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 to the provider.)
 - 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 to the provider.)

n. 14 ~~Hospital Itemized~~ statement or itemized invoice not submitted with billing form. (Insurer must specify 'statement' or 'invoice' to the provider.)

o. 15 Invalid procedure code. (Use when other valid procedure codes are present.)

p. 16 Documentation does not support that services rendered were medically necessary.

q. 17 Required supplemental documentation not filed with the bill. (Insurer must specify required documentation to the provider.)

r. 18 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.

s. 19 Required DFS-F5-DWC-25 form not submitted within three business days of the first treatment pursuant to Section 440.13(4)(a), F.S.

t. 20 Other: Unique EOBR code description. Use of EOBR code "20" 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 "20", an insurer must include the specific explanation of the code and maintain a standardized EOBR code description list.

~~(o)~~ An insurer, service company/TPA, submitter or any entity acting on behalf of the insurer shall make available to the division and to the Agency, upon request and without charge, a legibly reproduced copy of Forms DFS-F5-DWC-9, DFS-F5-DWC-10 (or insurer pre-approved alternate form), DFS-F5-DWC-11, DFS-F5-DWC-25, DFS-F5-DWC-90, supplemental documentation, proof of payment, EOBR and/or standardized EOBR code "20" description list.

~~(p)~~ An insurer, service company/TPA or any entity acting on behalf of the insurer shall submit to the health care provider an Explanation of Bill Review, utilizing the EOBR codes listed above, including the insurer name and specific insurer contact information.

~~(6)~~ Insurer Electronic Medical Report (~~Electronic Format, Paper format, or Excel Spreadsheet format~~) Filing ~~to the~~ the Division.

~~(a)~~ Effective March 16, 2005, all 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:~~

1. An insurer shall be responsible for accurately completing the electronic record layout programming requirements for the reporting of the Form DFS-F5-DWC-09 Claim Detail Record Layout – Revision "C" and the Form DFS-F5-DWC-10 Claim Detail Record Layout – Revision "C" in accordance with the Florida Workers' Compensation Medical Implementation Guide (MEIG), 2005, to the division on or before December 1, 2005. The electronic record layout

for Form DFS-F5-DWC-9 adds the new field 18B for submission of the National Drug Code (NDC) number. The electronic record layout for Form DFS-F5-DWC-10 in the 2005 MEIG adds a claim detail record layout which includes form fields 6, 7, 8, 9, 10, 11, 12, 13, 14 and 15 for Section 2 – Prescription Drugs, and form fields 16, 17, 18 and 19 for Section 3 – Medical Supplies. The conversion implementation schedule is as follows:

a. Insurers who have been approved for reporting production data with the new Medical Data System between August 2, 2004 and November 9, 2004 shall begin testing on September 1, 2005 and shall be in production with the new record layouts no later than September 30, 2005.

b. Insurers who have been approved for reporting production data with the new Medical Data System between November 18, 2004 and February 28, 2005 shall begin testing on October 1, 2005 and shall be in production with the new record layouts no later than October 31, 2005.

c. Insurers who have been approved for reporting production data with the new Medical Data System between March 4, 2005 and April 30, 2005 shall begin testing on November 1, 2005 and shall be in production with the new record layouts no later than November 30, 2005.

1. Submitters who are electronically filing any medical reports with the division, as of the effective date of this rule, must complete a test transmission and be approved by the division for production transmission that meets the requirements set forth in the Florida Workers' Compensation Medical EDI Implementation Guide, 2004 according to the following schedule:

a. August 2 through September 15, 2004, implementation of the test transmission to production transmission processes for all electronic form equivalents will include submitters with names beginning with the letters A through E and that are submitting for multiple insurers, service companies or third party administrators.

b. September 16 through October 29, 2004, implementation of the test transmission to production transmission processes for all electronic form equivalents will include submitters with names beginning with the letters F through Z and that are submitting for multiple insurers, service companies or third party administrators.

2. Submitters who are not electronically filing any medical reports with the division, as of November 1, 2004, must complete a test transmission and be approved by the division for production transmission that meets the requirements set forth in the Florida Workers' Compensation Medical EDI Implementation Guide, 2004 according to the following schedule:

a. November 1 through December 15, 2004, implementation of the test transmission to production transmission processes for all electronic form equivalents will

include submitters with names beginning with A through H and that are submitting for multiple insurers, service companies or third party administrators.

b. December 16, 2004 through January 31, 2005, implementation of the test transmission to production transmission processes for all electronic form equivalents will include submitters with names beginning with I through Q and that are submitting for multiple insurers, service companies or third party administrators.

e. February 1 through March 15, 2005, implementation of the test transmission to production transmission processes for all electronic form equivalents will include submitters with names beginning with R through Z and that are submitting for multiple insurers, service companies or third party administrators.

(b) Special Conversion to Electronic Reporting.

1. Submitters who have implemented electronic filing of any medical reports with the division within 120 calendar days prior to the effective date of this rule, shall be scheduled for the test transmission to production transmission processes, for all electronic form equivalents, to comply with requirements set forth in the Florida Workers' Compensation Medical EDI Implementation Guide, 2004, beginning February 1 through March 15, 2005.

2. The Division will, resources permitting, allow submitters that volunteer to complete the test transmission to production transmission processes earlier than the schedule denoted above. Each voluntary submitter shall have four ~~six~~ weeks to complete test transmission to production transmission processes, for all electronic form equivalents, that comply with requirements set forth in Florida Workers' Compensation Medical EDI Implementation Guide (MEIG), 2005~~4~~.

(b) Any insurer, or any other entity acting on behalf of the insurer, who enters into new EDI programming arrangements on or after March 16, 2005, shall not be relieved of the responsibility to comply with the EDI filing mandate pursuant to subparagraph (6)(a) of this rule. Any insurer's non-compliance with the EDI filing mandate shall be subject to administrative penalties and administrative fines pursuant to paragraph (7) of this rule or Section 440.525, F.S.

(c) Required data elements shall be submitted in compliance with the instructions and formats as set forth in the Florida Workers' Compensation Medical EDI Implementation Guide (MEIG), 2005~~4~~.

(d) The division will notify the insurer on the "Medical Claim Processing Report" of the corrections necessary for rejected medical reports to be electronically re-filed with the division. An insurer shall correct and re-file all rejected medical claim reports to meet the filing requirements of paragraph (5)(e) of this rule.

(e) Submitters who experience a catastrophic event resulting in the insurer's failure to meet the reporting requirements in paragraph (5)(e) of this rule, shall submit a

written request within 3 business days of the catastrophic failure to the division for approval to submit in an alternative reporting method and an alternative filing timeline paper forms in order to meet division reporting requirements. The submission of paper forms due to a catastrophic failure shall not exceed 30 calendar days. Approval must be obtained from the Division's Office of Data Quality and Collection, 200 E. Gaines Street, Tallahassee, Florida 32399-4226. Approval to submit in an alternative reporting method and an alternative filing timeline paper forms shall be granted if a catastrophic event beyond the control of the submitter prevents electronic submission.

(f) ~~Until March 16, 2005 required medical reports may be paper form filed with the division by an insurer, service company or third party administrator as follows:~~

~~1. The insurer code number and service company/third party administrator code number (if applicable) accurately and legibly entered in the upper right corner on the form.~~

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

~~3. The required data elements as set forth in record layout sections of the Florida Workers' Compensation Medical EDI Implementation Guide, 2004. An insurer shall submit to the division the listed information, legibly entered on the paper form, as follows:~~

~~a. Form DFS F5-DWC-9.~~

~~I. "Procedure, Service or Supply Code" (as paid by the insurer, if different from billed code) entered in Field 24D1 without obscuring the billed code;~~

~~II. "Procedure, Service or Supply Code Modifier" (as paid by the insurer, if different from billed modifier) entered in Field 24D2 without obscuring the billed modifier;~~

~~III. "Insurer Payment per Line" entered in Field 24K.~~

~~IV. Additional data elements required pursuant to the Florida Workers' Compensation Medical EDI Implementation Guide, 2004 may be entered on the form, location to be determined by the insurer.~~

~~b. Form DFS F5-DWC-10.~~

~~I. "Insurer Payment per Line" written above the 'Usual Charge' in Field 15 or 19, respectively;~~

~~II. Additional data elements required pursuant to the Florida Workers' Compensation Medical EDI Implementation Guide, 2004 may be entered on the form, location to be determined by the insurer.~~

~~e. Form DFS F5-DWC-11.~~

~~I. "Insurer Payment per Line" entered in Field 30 following description;~~

~~II. Additional data elements required pursuant to the Florida Workers' Compensation Medical EDI Implementation Guide, 2004 may be entered on the form, location to be determined by the insurer.~~

~~d. Form DFS F5-DWC-90.~~

~~I. "HCPCS/RATES" code (as paid by the insurer, if different from billed code). Enter the reimbursed code above the billed code;~~

~~II. "HCPCS/RATES" code modifier (as paid by the insurer if different from billed modifier). Enter the reimbursed modifier above the billed modifier;~~

~~III. "Insurer Payment per Line" entered in Locator 49;~~

~~IV. Additional data elements required pursuant to the Florida Workers' Compensation Medical EDI Implementation Guide, 2004 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. Forms DFS F5-DWC-9, DFS F5-DWC-10 (or insurer pre-approved alternate form), DFS F5-DWC-11 or DFS F5-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 by form type category 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)(e) of this rule, respectively.~~

~~e. 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, insurer code number and service company third party administrator code number shall be specified.~~

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

~~V. The form type (Forms DFS F5-DWC-9, DFS F5-DWC-10, DFS F5-DWC-11 or DFS F5-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 45 calendar days after 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:

a. Every paper batch which is not accompanied by an accurately completed cover sheet or is not in compliance with sub-subparagraph (6)(f)4.a. of this rule, will be returned to the insurer, service company or third party administrator, and considered not in compliance with paragraph (5)(e) of this rule, until re-filed with an accurately completed cover sheet or correctly batched.

5. All required medical reports (Forms DFS-F5-DWC-9, DFS-F5-DWC-10, DFS-F5-DWC-11 or DFS-F5-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.

(g) As an alternative to submitting paper form batches, as described in paragraph (6)(f) of this rule, medical data that would otherwise be provided on paper, between the effective date of this rule and each submitter's deadline for electronic submission according to the schedule in paragraph (6)(a) of this rule, may be filed in electronic format to the division in a Medical Summary Report to meet the requirements of this rule. A request to submit medical data in this format shall be sent to ssmedrequest@dfs.state.fl.us. Upon receiving written approval from the division via e-mail, each electronic Medical Summary Report shall be filed by a submitter as follows:

1. No later than 15 calendar days following the end of each calendar month, an insurer, service company or third party administrator shall submit four division approved electronic Excel spreadsheets; one Excel spreadsheet for each of the four medical form types (Forms DFS-F5-DWC-9, DFS-F5-DWC-10, DFS-F5-DWC-11 and DFS-F5-DWC-90).

2. Each Excel spreadsheet must contain the following data elements:

a. Form Type (Forms DFS-F5-DWC-9, DFS-F5-DWC-10, DFS-F5-DWC-11 or DFS-F5-DWC-90).

b. Calendar Month/Year of medical data processed by the insurer submitted to the division, (i.e. 01/01/2004 through 01/31/2004).

c. Name of Insurer, Service Company, or Third Party Administrator submitting the monthly division approved electronic Excel spreadsheet.

d. Insurer code number, Service Company/Third Party Administrator code number submitting the monthly division approved electronic Excel spreadsheet.

e. Contact Name, address, including zip code, telephone number and e-mail address of the Insurer, Service Company or Third Party Administrator.

f. Total number of bills that were paid, adjusted and paid, disallowed or denied for the calendar month reported.

g. Total number of bills reported in sub-subparagraph f. above, that were paid, adjusted and paid, disallowed or denied more than 45 calendar days after the date insurer received the bill from the provider.

h. For each of the bills that were paid, adjusted and paid, disallowed or denied more than 45 calendar days after the date insurer received the bill from provider, the following additional data elements shall be provided on the division approved electronic Excel spreadsheet:

(I) Injured Employee Last Name;

(II) Injured Employee First Name;

(III) Injured Employee SSN;

(IV) Claims Handling Entity File Number;

(V) Date of Accident;

(VI) Date Insurer Received Bill from Provider;

(VII) Date Insurer Paid, Adjusted and Paid, Disallowed, or Denied the Bill;

(VIII) Total Dollar Amount Paid by Insurer. If disallowed or denied, \$0.00 is to be reported; and

(IX) Provider License, Pharmacist or Other Facility number as assigned by the professional regulatory board, licensing authority or state regulatory agency, whichever is applicable depending on form type that is submitted.

(i) Each Insurer, Service Company, or Third Party Administrator approved to submit the electronic Medical Summary Report, shall submit the division approved electronic Excel spreadsheets within the required time frame under subparagraph (6)(g)1. of this rule to ssmedformat@dfs.state.fl.us.

(7) Insurer Administrative Penalties and Administrative Fines.

(a) Insurer administrative penalties for untimely provider-payment or disposition of medical bills. The department shall impose insurer administrative penalties for failure to comply with the payment, adjustment and payment, disallowance or denial requirements pursuant to Section 440.20(6)(b), F.S. Timely performance standards for timely payments, adjustments and payments, disallowances or denials, reported on Forms DFS-F5-DWC-9, DFS-F5-DWC-10, DFS-F5-DWC-11 and DFS-F5-DWC-90, shall be calculated and applied on a monthly basis for each separate Form category that was received within a specific calendar month.

(b) Insurer administrative fines for failure to submit, untimely submission, filing and reporting of medical data requirements. 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. Insurer administrative fines shall be:

1. Calculated on a monthly basis for each separate Form category (Forms DFS-F5-DWC-9, DFS-F5-DWC-10, DFS-F5-DWC-11, DFS-F5-DWC-90) received and accepted by the division within a specific calendar month; and

2. Imposed for each ~~failure to file, untimely filed~~ ~~un filed~~, rejected and not re-submitted, or rejected and re-submitted untimely medical data report according to the following schedule:

- a. 1-15 calendar days late \$10.00;
- b. 16-30 calendar days late \$20.00;
- c. 31-45 calendar days late \$30.00;
- d. 46-60 calendar days late \$40.00;
- e. 61-75 calendar days late \$50.00;
- f. 76-90 calendar days late \$100.00; and
- g. 91 calendar days or greater \$2500.00.

~~(e) An insurer that fails to submit, or who untimely submits, any division approved Medical Summary Report electronic Excel spreadsheet required in subparagraph (6)(g)1. of this rule, shall be assessed a penalty for improper filing of \$25.00 per day, not to exceed a total penalty of \$1,000.00 per improperly filed Excel spreadsheet, in addition to any administrative penalty pursuant to Section 440.20(6)(b), F.S.~~

Specific Authority 440.13(4), 440.15(3)(b),(d), 440.185(5), 440.525(2), 440.591, 440.593(5) FS. Law Implemented 440.09, 440.13(2)(a),(3),(4),(6), (11),(12),(14),(16), 440.15(3)(b),(d), 440.20(6), 440.185(5),(9), 440.593 FS. History—New 1-23-95, Formerly 38F-7.602, 4L-7.602, Amended 7-4-04,

DEPARTMENT OF FINANCIAL SERVICES

OIR Insurance Regulation

RULE TITLE: Annual Audited Financial Reports
 RULE NO.: 690-137.002

PURPOSE AND EFFECT: This rule deals with the annual audit by an independent CPA filed pursuant to Section 624.424(8), F.S. This revision removes the surplus language dealing with remedies; such remedies already being part of the rules of the Secretary of State. The rule also changes the number of the form to be used to file for this exemption, changes the names of the entities from which the form may be procured, and states it is available from the DFS web page.

SUBJECT AREA TO BE ADDRESSED: Annual Audited Financial Reports.

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

LAW IMPLEMENTED: 624.307(1), 624.324, 624.424(8) 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., May 19, 2005

PLACE: Room 142, Larson Building, 200 East Gaines Street, Tallahassee, Florida

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this program, please advise the Office 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, IF AVAILABLE, IS: Paul Johns, Life and Health Financial Oversight, Office of Insurance Regulation, e-mail: paul.johns@fldfs.com
 THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS AVAILABLE AT NO CHARGE FROM THE CONTACT PERSON LISTED ABOVE.

DEPARTMENT OF FINANCIAL SERVICES

OIR Insurance Regulation

RULE TITLES: Disclosure
 RULE NOS.: 690-144.003
 Credit for Reinsurance 690-144.005

PURPOSE AND EFFECT: Requires domestic insurance companies to disclose any of their finite reinsurance agreements and requires compliance with the disclosure requirement for credit for reinsurance. Changes form number OIR-D0-1 to OIR-D0-1464.

SUBJECT AREA TO BE ADDRESSED: The subject area of the rule development is reinsurance, specifically the disclosure of any existing finite reinsurance agreements and compliance for credit for reinsurance and change in form number.

SPECIFIC AUTHORITY: 624.308, 624.610(14) FS.

LAW IMPLEMENTED: 624.307(1), 624.610 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., May 10, 2005

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

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this program, please advise the Office 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, IF AVAILABLE, IS: Claude Mueller, Property and Casualty Financial Oversight, Office of Insurance Regulation, e-mail: claud.mueller@fldfs.com
 THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS AVAILABLE AT NO CHARGE FROM THE CONTACT PERSON LISTED ABOVE.

Section II Proposed Rules

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."

AGENCY FOR HEALTH CARE ADMINISTRATION

Medicaid

RULE TITLES:	RULE NOS.:
Medicaid Provider Reimbursement Schedule	59G-4.002
Advanced Registered Nurse Practitioner Services	59G-4.010
Birth Center Services	59G-4.030
Chiropractic Services	59G-4.040
Hearing Services	59G-4.110
Outpatient Hospital Services	59G-4.160
Independent Laboratory Services	59G-4.190
Optometric Services	59G-4.210
Podiatry Services	59G-4.220
Physician Services	59G-4.230
Physician Assistant Services	59G-4.231
Portable X-Ray Services	59G-4.240
Registered Nurse First Assistant Services	59G-4.270
Visual Services	59G-4.340

PURPOSE AND EFFECT: Rule 59G-4.002, F.A.C., is a new rule, which will incorporate by reference the Florida Medicaid Provider Reimbursement Schedule, January 2005. The reimbursement schedule is a new publication that contains the procedure codes and maximum fees for the following Medicaid services: advanced registered nurse practitioner, birth center, chiropractic, dental, hearing, independent laboratory, licensed midwife, optometric, outpatient hospital laboratory, physician, physician assistant, podiatry, portable x-ray, registered nurse first assistant, and visual.

Amendments to Rules 59G-4.010, 59G-4.030, 59G-4.040, 59G-4.110, 59G-4.210, 59G-4.220, 59G-4.230, 59G-4.231, 59G-4.240, 59G-4.270, and 59G-4.340, F.A.C., will remove the January 2004 procedure codes and fee schedules from the Florida Medicaid Coverage and Limitations Handbooks that are incorporated by reference in the rules. The amendments to Rule 59G-4.160, F.A.C., will remove the March 2003 fee schedule from the Florida Medicaid Coverage and Limitations Handbook that is incorporated by reference in the rule. The amendment to Rule 59G-4.190, F.A.C., will remove the October 2003 fee schedule from the Florida Medicaid Coverage and Limitations Handbook that is incorporated by reference in the rule. We are removing the fee schedules from the handbooks that are incorporated by reference in the above

listed rules, because they are outdated. We are including the 2005 fee schedules in the Florida Medicaid Provider Reimbursement Schedule, which will be incorporated by reference in Rule 59G-4.002, F.A.C.

The effect will be to incorporate by reference the Florida Medicaid Provider Reimbursement Schedule, January 2005, which includes the procedure codes and maximum fees for advanced registered nurse practitioner, birth center, chiropractic, dental, hearing, independent laboratory, licensed midwife, optometric, outpatient hospital laboratory, physician, physician assistant, podiatry, portable x-ray, registered nurse first assistant, and visual services into Rule 59G-4.002, F.A.C. The procedure codes and fee schedules in the Florida Medicaid Coverage and Limitations Handbooks that are incorporated by reference in Rules 59G-4.010, 59G-4.030, 59G-4.040, 59G-4.110, 59G-4.160, 59G-4.190, 59G-4.210, 59G-4.220, 59G-4.230, 59G-4.231, 59G-4.240, 59G-4.270, and 59G-4.340, F.A.C., will be removed.

SUMMARY: Rule 59G-4.002, F.A.C., will incorporate by reference the Florida Medicaid Provider Reimbursement Schedule, January 2005, which includes the procedure codes and maximum fees for advanced registered nurse practitioner, birth center, chiropractic, dental, hearing, independent laboratory, licensed midwife, optometric, outpatient hospital laboratory, physician, physician assistant, podiatry, portable x-ray, registered nurse first assistant, and visual services. The procedure codes and fee schedules in the Florida Medicaid Coverage and Limitations Handbooks that are incorporated by reference in Rules 59G-4.010, 59G-4.030, 59G-4.040, 59G-4.110, 59G-4.160, 59G-4.190, 59G-4.210, 59G-4.220, 59G-4.230, 59G-4.231, 59G-4.240, 59G-4.270, and 59G-4.340, F.A.C., will be removed.

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

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

SPECIFIC AUTHORITY: 409.919 FS.

LAW IMPLEMENTED: 383.335, 409.905, 409.906, 409.907, 409.908, 409.9081 FS.

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

DATE AND TIME: 2:00 p.m., Tuesday, May 17, 2005

PLACE: Agency for Health Care Administration, 2727 Mahan Drive, Building #3, Mail Stop 20, Conference Room D, Tallahassee, Florida

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Karen Girard, Bureau of Medicaid Services, 2727 Mahan Drive, Mail Stop 20, Tallahassee, Florida 32308, (850)488-9711

THE FULL TEXT OF THE PROPOSED RULES IS:

59G-4.002 Medicaid Provider Reimbursement Schedule.

Medicaid providers who provide the following services and their billing agents who submit claims on behalf of an enrolled Medicaid provider must be in compliance with the provisions of the Florida Medicaid Provider Reimbursement Schedule, January 2005: advanced registered nurse practitioner, birth center, chiropractic, dental, hearing, independent laboratory, licensed midwife, optometric, outpatient hospital laboratory, physician, physician assistant, podiatry, portable x-ray, registered nurse first assistant, and visual.

Specific Authority 409.919 FS. Law Implemented 409.905, 409.906, 409.908 FS. History–New _____.

59G-4.010 Advanced Registered Nurse Practitioner Services.

(1) No change.

(2) All advanced registered nurse practitioner services providers enrolled in the Medicaid program must be in compliance with the Florida Medicaid Advanced Registered Nurse Practitioner Services Coverage and Limitations Handbook, January 2004, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.905, 409.907, 409.908, 409.9081 FS. History–New 12-21-80, Formerly 10C-7.52, Amended 8-18-92, Formerly 10C-7.052, Amended 8-22-96, 3-11-98, 10-13-98, 6-8-99, 4-23-00, 8-5-01, 2-20-03, 8-5-03, 8-3-04, _____.

59G-4.030 Birth Center Services.

(1) No change.

(2) All birth center services providers enrolled in the Medicaid program must be in compliance with the Florida Medicaid Birth Center and Licensed Midwife Services Coverage and Limitations Handbook, January 2004, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 383.335, 409.906, 409.907, 409.908, 409.9081 FS. History–New 4-18-85, Formerly 10C-7.532, Amended 8-18-92, Formerly 10C-7.0532, Amended 4-22-96, 3-11-98, 10-13-98, 5-24-99, 4-23-00, 8-5-01, 2-20-03, 8-5-03, 7-27-04, _____.

59G-4.040 Chiropractic Services.

(1) No change.

(2) All chiropractic services providers enrolled in the Medicaid program must be in compliance with the Florida Medicaid Chiropractic Services Coverage and Limitations Handbook, January 2004, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.907, 409.908, 409.9081 FS. History–New 6-1-89, Amended 7-1-91, 12-31-91, 3-17-92, 4-21-92, 11-9-92, 7-5-93, 1-19-94, Formerly 10C-7.066, Amended 10-10-94, 5-25-95, 1-9-96, 10-21-97, 5-24-99, 4-23-00, 7-5-01, 2-20-03, 8-5-03, 8-3-04, _____.

59G-4.110 Hearing Services.

(1) No change.

(2) All physicians, audiologists and hearing aid specialists enrolled in the Medicaid program must be in compliance with the provisions of the Florida Medicaid Hearing Services Coverage and Limitations Handbook, January 2004, updated January 2005-1 and January 2005-2, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.907, 409.908 FS. History–New 8-3-80, Amended 7-21-83, Formerly 10C-7.522, Amended 4-13-93, Formerly 10C-7.0522, Amended 12-21-97, 10-13-98, 5-7-00, 7-5-01, 2-20-03, 8-5-03, 7-27-04, _____.

59G-4.160 Outpatient Hospital Services.

(1) No change.

(2) All hospital providers enrolled in the Medicaid program must comply with the provisions of the Florida Medicaid Hospital Services Coverage and Limitations Handbook, March 2003, updated January 2005, and the Florida Medicaid Provider Reimbursement Handbook, UB-92, April 2004, both incorporated by reference in this rule. Both handbooks are available from the Medicaid fiscal agent contractor.

Specific Authority 409.919 FS. Law Implemented 409.905, 409.908, 409.9081 FS. History–New 1-1-77, Revised 12-7-78, 1-18-82, Amended 7-1-83, 7-16-84, 7-1-85, 10-31-85, Formerly 10C-7.40, Amended 9-16-86, 2-28-89, 5-21-91, 5-13-92, 7-12-92, 1-5-93, 6-30-93, 7-20-93, 12-21-93, Formerly 10C-7.040, Amended 6-13-94, 12-27-94, 2-21-95, 9-11-95, 11-12-95, 2-20-96, 10-27-98, 5-12-99, 10-18-99, 3-22-01, 8-12-01, 2-25-03, 8-14-03, 11-28-04, _____.

59G-4.190 Independent Laboratory Services.

(1) No change.

(2) All independent laboratory providers enrolled in the Medicaid program must be in compliance with the provisions of the Florida Medicaid Independent Laboratory Coverage and Limitations Handbook, October 2003, updated January 2005-1, incorporated by reference, and the Florida Medicaid Provider

Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.905, 409.908, 409.9081 FS. History—New 1-1-77, Amended 10-11-81, Formerly 10C-7.41, Amended 6-30-92, Formerly 10C-7.041, Amended 9-28-94, 1-9-96, 10-20-96, 9-14-97, 3-22-00, 5-16-01, 2-14-02, 8-25-03, 9-3-03, 10-27-03,_____.

59G-4.210 Optometric Services.

(1) No change.

(2) All optometric practitioners enrolled in the Medicaid program must be in compliance with the provisions of the Florida Medicaid Optometric Services Coverage and Limitations Handbook, January 2005, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, HCFA-1500 and Child Health Check-Up 221, which is incorporated by reference in Rule 59G-5.020, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.908, 409.9081 FS. History—New 4-13-93, Amended 7-1-93, Formerly 10C-7.069, Amended 12-21-97, 10-13-98, 5-24-99, 4-23-00, 7-5-01, 2-20-03, 8-5-03,_____.

59G-4.220 Podiatry Services.

(1) No change.

(2) All podiatry services providers enrolled in the Medicaid program must be in compliance with the provisions of the Florida Medicaid Podiatry Services Coverage and Limitations Handbook, January 2004, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.905, 409.907, 409.908, 409.9081 FS. History—New 1-23-84, Amended 10-25-84, Formerly 10C-7.529, Amended 4-21-92, 11-9-92, 7-1-93, Formerly 10C-7.0529, 10P-4.220, Amended 1-7-96, 3-11-98, 10-13-98, 5-24-99, 4-23-00, 7-5-01, 2-20-03, 8-5-03, 6-27-04,_____.

59G-4.230 Physician Services.

(1) No change.

(2) All physician services providers enrolled in the Medicaid program must be in compliance with the Florida Medicaid Physician Services Coverage and Limitations Handbook, January 2004, updated January 2005-1, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.905, 409.907, 409.908, 409.9081 FS. History—New 1-1-77, Revised 2-1-78, 4-1-78, 1-2-79, 1-1-80, Amended 2-8-82, 3-11-84, Formerly 10C-7.38, Amended 1-10-91, 11-5-92, 1-7-93, Formerly 10C-7.038, Amended 6-29-93, 9-6-93, Formerly 10P-4.230, Amended 6-13-94, 2-9-95, 3-10-96, 5-28-96, 3-18-98, 9-22-98, 8-25-99, 4-23-00, 8-5-01, 2-20-03, 8-5-03, 6-27-04, 8-3-04,_____.

59G-4.231 Physician Assistant Services.

(1) No change.

(2) All physician assistant services providers enrolled in the Medicaid program must be in compliance with the Florida Medicaid Physician Assistant Services Coverage and Limitations Handbook, January 2004, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.907, 409.908, 409.9081 FS. History—New 8-21-95, Amended 5-28-96, 3-11-98, 10-13-98, 8-9-99, 4-23-00, 8-5-01, 2-20-03, 8-5-03, 8-3-04,_____.

59G-4.240 Portable X-Ray Services.

(1) No change.

(2) All portable x-ray providers enrolled in the Medicaid program must comply with the provisions of the Florida Medicaid Portable X-ray Services Coverage and Limitations Handbook, October 2003, updated January 2005, incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.905, 409.908, 409.9081 FS. History—New 10-11-81, Formerly 10C-7.411, Amended 7-1-92, Formerly 10C-7.0411, Amended 5-16-94, 1-9-96, 10-20-96, 8-27-97, 3-22-00, 2-14-02, 6-1-03, 8-5-03, 3-15-04,_____.

59G-4.270 Registered Nurse First Assistant Services.

(1) No change.

(2) All registered nurse first assistant services providers enrolled in the Medicaid program must be in compliance with the Florida Medicaid Registered Nurse First Assistant Services Coverage and Limitations Handbook, January 2004, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.902, 409.906 ~~409.905~~, 409.908, 409.9081 FS. History—New 3-11-98, Amended 10-13-98, 5-24-99, 4-23-00, 7-5-01, 2-20-03, 8-5-03, 8-4-04,_____.

59G-4.340 Visual Services.

(1) No change.

(2) All visual services practitioners enrolled in the Medicaid program must be in compliance with the provisions of the Florida Medicaid Visual Services Coverage and Limitations Handbook, January 2004, updated January 2005, which is incorporated by reference, and the Florida Medicaid Provider Reimbursement Handbook, CMS-1500, which is incorporated by reference in Rule 59G-4.001, F.A.C. Both handbooks are available from the Medicaid fiscal agent.

Specific Authority 409.919 FS. Law Implemented 409.906, 409.908 FS. History—New 7-30-80, Formerly 10C-7.521, Amended 4-20-93, 8-25-93, Formerly 10C-7.0521, Amended 12-21-97, 10-13-98, 6-10-99, 4-23-00, 1-23-02, 2-20-03, 8-5-03, 10-12-04, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Karen Girard
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Alan Levine, Secretary
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 8, 2005
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: December 30, 2004

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 Nursing

RULE TITLE: Effective Date
RULE NO.: 64B9-17.004

PURPOSE AND EFFECT: To set 180 days from the date this rule chapter is filed as the time the provisions of this rule chapter shall become effective.

SUMMARY: 180 days are set from the date this rule chapter is filed as the time the provisions of this rule chapter shall become effective.

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

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

SPECIFIC AUTHORITY: 464.003(3)(a), 464.006 FS.
LAW IMPLEMENTED: 464.003(3)(a), 464.012(3), 464.015(1),(5), 464.019(1)(j),(n) FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dan Coble, Executive Director, Board of Nursing, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3259

THE FULL TEXT OF THE PROPOSED RULE IS:

64B9-17.004 Effective Date.

To allow institutions time to evaluate the competency and knowledge of or to train the registered nurse who may want to administer conscious or deep sedation, the provisions of this rule chapter shall become effective 180 days from the date this rule chapter is filed. Nothing shall prohibit those individuals who meet the requirements specified in this rule chapter at the time of its adoption from engaging in the administration of conscious or deep sedation as delineated in this rule chapter.

Specific Authority 464.003(3)(a), 464.006 FS. Law Implemented 464.003(3)(a), 464.012(3), 464.015(1),(5), 464.019(1)(j),(n) FS. History—New _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Nursing
NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Board of Nursing
DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 13, 2003
DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: March 18, 2005

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Economic Self Sufficiency Program

RULE TITLE: Eligibility Determination Process
RULE NO.: 65A-1.205

PURPOSE AND EFFECT: The proposed rule amendment clarifies the department’s eligibility processing procedures applicable to all public assistance programs. It also provides for the use of a paper or electronic/web based application form to apply for public assistance.

SUMMARY: The proposed rule amendment provides for the use of a paper or electronic/web based application form to apply for public assistance. It also provides clarification on the department’s eligibility determination process applicable to all public assistance programs.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COST: None.

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

SPECIFIC AUTHORITY: 409.919, 414.45 FS.
LAW IMPLEMENTED: 414.095, 414.31, 409.903, 409.904, 409.919, 410.033 FS.

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

TIME AND DATE: 10:30 a.m., May 16, 2005

PLACE: 1317 Winewood Boulevard, Building 3, Room 439, Tallahassee, Florida 32399-0700

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Jennifer Lange, Policy Chief, 1317 Winewood Boulevard, Building 3, Room 450, Tallahassee, Florida 32399-0700, (850)921-0253

THE FULL TEXT OF THE PROPOSED RULE IS:

65A-1.205 Eligibility Determination Process.

(1) Eligibility is determined in accordance with federal regulations, federal statutes, Florida Statutes, and Florida Administrative Code for the applicable program. The individual receives a Request for Assistance and completes a paper or electronic/web-based application for assistance # to the best of the individual's ability and submits it to Economic Self-Sufficiency (ESS) office or authorized agent. An The eligibility specialist determines the potential eligibility of each household member for public assistance and prints out the data on the Common Application Form (CAF) or alternately, Form CF-ES 2327, Common Application Form and Eligibility Questionnaire, May 04, incorporated by reference, can substitute for the CAF. The individual then decides whether or not to apply for assistance. The Common Application Form CF-ES 2327 is signed and dated by the individual to complete the process of applying. The applicant must be informed of the department's standards of assistance, penalties for fraud, right to appeal and to have a fair hearing, the civil rights provisions and other rights and responsibilities. An applicant may withdraw the application at any time without affecting their right to reapply at any time. The paper or electronic/web-based Application for Assistance, CF-ES 2066, is incorporated by reference in Administrative Rule 65A-1.400, F.A.C.

(a) No change.

~~(b) The eligibility specialist determines eligibility and provides services and benefits using the Florida On-Line Recipient Integrated Data Access (FLORIDA) computer system. When the system is unavailable for a 20 minute or for a longer period of time or unresponsive to the point of rendering the system ineffectual and causes a serious backlog of clients, the eligibility specialist will initiate manual procedures to continue unit operations.~~

~~(b)(e) Time standards for processing applications vary by public assistance program and must be done in accordance with federal regulations 7 CFR 273.2(g) (food stamps, 45 CFR 233.10(a)(3)(i) (temporary cash assistance), and 42 CFR 435.911 (Medicaid). The Time standards begins on with the date on which the department or an outpost site receives a signed and dated of application and ends on with the date on~~

~~which benefits are made available or a notice determination of ineligibility is mailed made. For the Medicaid program, the time standard ends on the date an eligibility notice is mailed. Applications must be processed and determinations of eligibility made within the following time frames:~~

Program	Application Processing Time Standards
Expedited Food Stamps	7 days
Food Stamps	30 days
Temporary Cash Assistance, Refugee Assistance and Child In-Care Medical Assistance and State Funded Programs for individuals who apply on the basis of disability	45 days
For all other Medical Assistance and State Funded Programs for applicants on the basis Eligibility, including OSS, QMB, SLMB, and QI	90 days
	45 days

~~All days counted after the date of application are calendar days. Applicant delay days do not count in determining non-compliance with the time standard. See paragraph (e) of this rule. Information provided on form CF-ES 2930, Screening for Expedited Medicaid Appointments, 7/00, incorporated by reference) will be used in determining expedited processing of Medicaid disability-related applications.~~

~~(c)(d) If the eligibility specialist determines at the interview or at any time during the application process that additional information or verification is required, or that an assistance group member is required to register for employment services, the specialist must grant the assistance group 10 calendar days to furnish the required documentation or to comply with the requirements. For all programs, the verifications are due 10 calendar days from the date of written request (i.e., the date the verification checklist is generated) or 30 days from the date of application, whichever is later. In cases where medical information is requested, the return due date is 30 calendar days following the request or 30 days from the date of application whichever is later. If the verification due date falls on a holiday or a weekend, the deadline for the requested information is the next working day. If the verification or information is difficult for the person to obtain, the eligibility specialist must provide assistance in obtaining the verification or information when requested or when it appears necessary. If the required verifications and information are not provided by the deadline date, the application is denied, unless a request for extension is made by the applicant or there are extenuating circumstances justifying an additional extension. The eligibility specialist makes the decision of whether to grant the request for extension based on extenuating circumstances beyond the control of the individual, such as sickness, lack of transportation, etc. When all required~~

information is obtained, the eligibility specialist determines eligibility for the public assistance programs. If the eligibility criteria are met, benefits are authorized.

(d)(e) No change.

~~(f) Copies of brochure CF/PI 165-107 and the form CF-ES 2930 may be obtained from the Economic Self-Sufficiency Program Office, 1317 Winewood Boulevard, Building 3, Room 406, Tallahassee, Florida 32399-0700.~~

(2) Eligibility must be redetermined at periodic intervals in accordance with federal regulations for each applicable program ~~7 CFR 273.14 (food stamps), 42 CFR 435.916 (Medicaid), 45 CFR 206.10(a)(9)(iii) (temporary cash assistance), and Section 414.095, F.S.~~

~~(a) A complete eligibility review is the process in which the eligibility specialist reviews all factors related to continued eligibility of the assistance group.~~

~~(b) A partial eligibility review entails review of one or more, but not all factors of eligibility. Partial reviews are scheduled based on known facts or anticipated changes or when an unanticipated change occurs. A face-to-face interview is not usually required, unless the necessary information cannot be obtained without this exchange.~~

~~(3) Face-to-face interviews with the applicant/recipient or their designated representative must be held at each application unless waived due to hardship as described in 7 CFR 273.2(e)(2). Complete redeterminations of eligibility and recipient interviews are conducted in accordance with federal regulations governing the benefit type. These interviews are held at the CF local office, the recipient's home, or other location upon which the recipient and eligibility specialist mutually agree. The recipient is required to keep the interview appointment or make arrangements with the eligibility specialist prior to the appointment time to reschedule the appointment if necessary.~~

~~(4) An applicant or recipient who fails to keep an appointment without arranging another time with the eligibility specialist; fails or refuses to sign and date the application form(s) described in subsection (1); fails or refuses to submit a periodic report; or fails or refuses to submit required documentation or verification will be denied benefits as eligibility cannot be established.~~

(5) through (6) renumbered (3) through (4) No change.

~~(7) The Notice of Case Action (denial) (automated notice), Request for Assistance Withdrawal (automated notice), and Appointment Letter (automated notice) used in the eligibility determination process are hereby incorporated by reference. Referral to the Family Safety Program for the caregiver home study as to adequacy and readiness of the caregiver to provide permanent care will be on the Relative Caregiver program Request for Eligibility Consideration, CF-ES 2305, Apr 01 (incorporated by reference). Copies of these forms may be~~

~~obtained from the Economic Self-Sufficiency Program Office, 1317 Winewood Boulevard, Building 3, Room 427, Tallahassee, Florida 32399-0700.~~

Specific Authority 409.919, 414.45 FS. Law Implemented 409.903, 409.904, 409.919, 410.033, 414.045, 414.095, 414.31 FS. History-New 4-9-92, Amended 11-22-93, 8-3-94, Formerly 10C-1.205, Amended 11-30-98, 9-27-00, 7-29-01, 9-12-04, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
Lonna Cichon

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Jennifer Lange

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 15, 2005

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 24, 2004

DEPARTMENT OF FINANCIAL SERVICES

Division of Workers' Compensation

RULE TITLE: RULE NO.:

Florida Workers' Compensation 69L-7.100
Reimbursement Manual for
Ambulatory Surgical Centers (ASCs)

PURPOSE AND EFFECT: To amend Rule 69L-7.100, F.A.C., and to adopt the 2005 reimbursement manual for this rule.

SUMMARY: The rule adopts a 2005 edition of the Florida Workers' Compensation Reimbursement Manual for Ambulatory Surgical Centers in order to implement the statewide schedules of maximum medical reimbursement allowances determined by the Three-Member Panel, pursuant to Section 440.13(12), Florida Statutes, at its meeting on November 19, 2004, and otherwise address issues raised by the Three-Member Panel.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The Department has considered the regulatory costs of the rule. It is believed that the costs involved are out-weighed by the cost savings and other benefits of the rule.

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

SPECIFIC AUTHORITY: 440.13(14), 440.591 FS.

LAW IMPLEMENTED: 440.13(7),(12),(14) FS.

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

TIME AND DATE: 2:00 p.m., May 17, 2005

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 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 FULL TEXT OF THE PROPOSED RULE IS:

69L-7.100 Florida Workers' Compensation Reimbursement Manual for Ambulatory Surgical Centers (ASCs).

(1) The Florida Workers' Compensation Reimbursement Manual for Ambulatory Surgical Centers, 2005 ~~1992~~ Edition, is adopted by reference as part of this rule. The manual contains reimbursement policies and maximum reimbursement allowances for ambulatory surgical facility services, which are items and services provided in connection with a surgical procedure. The manual contains basic instructions and information for all ambulatory surgical centers and insurers concerning carriers in the preparation and reimbursement of claims for ambulatory surgical facility services.

(2) The Division has incorporated in the Florida Workers' Compensation Reimbursement Manual for Ambulatory Surgical Centers, 2005 Edition, procedure codes consistent with the Physicians' Current Procedural Terminology (CPT®), 2005 Professional Edition, Copyright 2004, American Medical Association; American Medical Association's Current Procedural Terminology (1992 CPT). This publication is adopted by reference as part of this rule. When a procedure is performed which is not listed in the manual, the ambulatory surgical center must use the appropriate code and descriptor contained in the Physicians' Current Procedural Terminology (CPT®), 2005 Professional Edition, Copyright 2004, American Medical Association most current copy of the American Medical Association's Current Procedural Terminology. In such instances, carriers must reimburse ambulatory surgical centers 70% of the ambulatory surgical centers' usual and customary charge.

(3) ~~All medical services, which include ambulatory surgical facility services, must be "medically necessary" as defined in Section 440.13, Florida Statutes. Medical services which are of an experimental, investigative or research nature must be approved by the Division of Workers' Compensation prior to authorization by the carrier.~~

(3)(4) The Florida Workers' Compensation Reimbursement Manual for Ambulatory Surgical Centers, 2005 ~~1992~~ Edition, incorporated above, is available for inspection during normal business hours at the Florida Department of Financial Services, Document Processing

Section, 200 East Gaines Street, Tallahassee, Florida 32399-0311, or via the Department's web sit at <http://www.fldfs.com> which contains the reimbursement policies and maximum reimbursement allowances for ambulatory surgical facilities, is distributed by the Division of Workers' Compensation, Document Processing Center, 200 East Gaines Street, Tallahassee, Florida 32399-4230.

Specific Authority 440.13(14), 440.591 FS. Law Implemented 440.13(7),(12),(14) 440.09(1),(2), 440.13(1)(a),(b),(d),(g),(h),(2)(a),(d),(e),(h),(j),(3),(4)(a),(b),(f),(g),(h),(i)5., 440.37(2)(a) FS. History--New 8-7-91, Amended 12-31-92, Formerly 38F-7.100, 4L-7.100, Amended _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Dan Sumner, Deputy Director of Workers' Compensation, Division of Workers' Compensation, Department of Financial Services

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Tanner Holloman, Director of Workers' Compensation, Division of Workers' Compensation, Department of Financial Services

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: April 11, 2005

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 24, 2004

DEPARTMENT OF FINANCIAL SERVICES

Division of Workers' Compensation

RULE TITLE: Florida Workers' Compensation

RULE NO.:

Reimbursement Manual for Hospitals 69L-7.501

PURPOSE AND EFFECT: To amend Rule 69L-7.501, F.A.C., and to adopt the 2005 reimbursement manual for this rule.

SUMMARY: The rule adopts a 2005 edition of the Florida Workers' Compensation Reimbursement Manual for Hospitals in order to implement the statewide schedules of maximum medical reimbursement allowances determined by the Three-Member Panel, pursuant to Section 440.13(12), Florida Statutes, at its meeting on November 19, 2004, and otherwise address issues raised by the Three-Member Panel.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The Department has considered the regulatory costs of the rule. It is believed that the costs involved are out-weighed by the cost savings and other benefits of the rule.

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

SPECIFIC AUTHORITY: 440.13(14), 440.591 FS.

LAW IMPLEMENTED: 440.13(7),(12),(14) FS.

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

TIME AND DATE: 9:00 a.m., May 17, 2005
 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 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 FULL TEXT OF THE PROPOSED RULE IS:
 69L-7.501 Florida Workers' Compensation Reimbursement Manual for Hospitals.
 (1) The Florida Workers' Compensation Reimbursement Manual for Hospitals, 2005 2004 Second Edition is adopted by reference as part of this rule. The manual contains reimbursement policies and per diem rates for hospital services and supplies.

(2) Form DFS-F5-DWC-90, (UB-92 HCFA-1450 Uniform Bill, rev. 1992) Uniform Bill (rev. 1992), also known as the UB-92, or HCFA-1450, is hereby incorporated by reference as part of this rule. In addition, (The Florida Workers' Compensation Health Care Provider Reimbursement Manual, 2005 2004, Second Edition is incorporated by reference as part of this rule also. The manual contains reimbursement policies, guidelines, billing codes and maximum reimbursement allowances for physical therapy, occupational therapy, speech therapy, radiology and clinical laboratory services which contained in the manual shall be applied to hospital services provided on an outpatient basis only.

(3) The Florida Workers' Compensation Reimbursement Manual for Hospitals, 2005 Edition incorporated in subsection (1) above, and Form DFS-F5-DWC-90, incorporated above, are available for inspection during normal business hours; at the State of Florida Department of Financial Services, Document Processing Section, 200 East Gaines Street, Tallahassee, Florida 32399-0311, or via the Department's website at <http://www.fldfs.com>.

Specific Authority 440.13(14), 440.591 FS. Law Implemented 440.13(7),(12),(14) FS. History--New 6-9-87, Amended 6-1-92, 10-27-99, 7-3-01, Formerly 38F-7.501, 4L-7.501, Amended 12-4-03, 1-1-04, 7-4-04,

NAME OF PERSON ORIGINATING PROPOSED RULE:
 Dan Sumner, Deputy Director of Workers' Compensation, Division of Workers' Compensation, Department of Financial Services

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Tanner Holloman, Director of Workers' Compensation, Division of Workers' Compensation, Department of Financial Services
 DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 30, 2005
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 24, 2004

DEPARTMENT OF FINANCIAL SERVICES

OIR Insurance Regulation

RULE TITLE: Annual and Quarterly Reporting Requirements
 RULE NO.: 69O-137.001

PURPOSE, EFFECT AND SUMMARY: To adopt the 2005 NAIC Quarterly and Annual Statement Instructions and NAIC's Accounting Practices and Procedures Manual, as required by Section 624.424, Florida Statutes.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: None.

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

SPECIFIC AUTHORITY: 624.307, 624.308(1) FS.

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

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

TIME AND DATE: 9:30 a.m., May 18, 2005
 PLACE: Room 143, Larson Building, 200 East Gaines Street, Tallahassee, Florida

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this program, please advise the Office at least 5 calendar days before the program by contacting the person listed below.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kerry Krantz, Life and Health Financial Oversight, Office of Insurance Regulation, e-mail: kerry.krantz@fldfs.com

THE FULL TEXT OF THE PROPOSED RULE IS:

69O-137.001 Annual and Quarterly Reporting Requirements.

(1) through (3) No change.

(4) Manuals Adopted.

(a) Annual and quarterly statements shall be prepared in accordance with the following manuals, which are hereby adopted and incorporated by reference:

- 1. The NAIC's Quarterly and Annual Statement Instructions, Property and Casualty, 2005 2004;
- 2. The NAIC's Quarterly and Annual Statement Instructions/Life, Accident and Health, 2005 2004;
- 3. The NAIC's Quarterly and Annual Statement Instructions/Health, 2005 2004; and
- 4. The NAIC's Accounting Practices and Procedures Manual, as of March 2005 2004.

(b) No change.

1. No change.

2. For inspection at the Office at its headquarters in Tallahassee, Florida, during regular business hours ~~at the Bureau of Life and Health Insurer Solvency or the Bureau of Property and Casualty Insurer Solvency, as appropriate, Division of Insurer Services, Office of Insurance Regulation, Larson Building, Tallahassee, FL 32399-0300.~~

Specific Authority 624.307, 624.308(1) FS. Law Implemented 624.307(1), 624.424(1) FS. History—New 3-31-92, Amended 8-24-93, 4-9-95, 4-9-97, 4-4-99, 11-30-99, 2-11-01, 4-5-01, 12-4-01, 12-25-01, 8-18-02, 7-27-03, Formerly 4-137.001, Amended 1-6-05, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Kerry Krantz, Life and Health Financial Oversight, Office of Insurance Regulation

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Richard Robleto, Deputy Commissioner, Office of Insurance Regulation

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 21, 2005

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 25, 2005

DEPARTMENT OF FINANCIAL SERVICES

OIR Insurance Regulation

RULE TITLE: NAIC Financial Examiners

RULE NO.:

Handbook Adopted 690-138.001

PURPOSE, EFFECT AND SUMMARY: To adopt the 2005 NAIC Financial Condition Examiners Handbook Adopted, as required by Section 624.424, Florida Statutes.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: None.

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

SPECIFIC AUTHORITY: 624.308(1) FS.

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

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

TIME AND DATE: 9:30 a.m., May 18, 2005

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

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this program, please advise the Office at least 5 calendar days before the program by contacting the person listed below.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Kerry Krantz, Life and Health Financial Oversight, Office of Insurance Regulation, e-mail: kerry.krantz@fldfs.com

THE FULL TEXT OF THE PROPOSED RULE IS:

690-138.001 NAIC Financial Examiners Handbook Adopted.

(1) The National Association of Insurance Commissioners Financial Condition Examiners Handbook, ~~Volume 1 (2005 2004)~~ is hereby adopted and incorporated by reference.

(2) through (3) No change.

Specific Authority 624.308(1) FS. Law Implemented 624.307(1), 624.316(1)(c) FS. History—New 3-30-92, Amended 4-9-97, 4-4-99, 11-30-99, 2-11-01, 12-25-01, 8-18-02, 7-27-03, Formerly 4-138.001, Amended 1-6-05, _____.

NAME OF PERSON ORIGINATING PROPOSED RULE: Kerry Krantz, Life and Health Financial Oversight, Office of Insurance Regulation

NAME OF SUPERVISOR OR PERSON WHO APPROVED THE PROPOSED RULE: Richard Robleto, Deputy Commissioner, Office of Insurance Regulation

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 21, 2005

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 25, 2005

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

DEPARTMENT OF STATE

Division of Cultural Affairs

RULE NO.: IT-1.001

RULE TITLE: Division of Cultural Affairs

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S. in response to comments received from the Joint Administrative Procedures Committee. The rule was originally published in Vol. 31, No. 7 of the February 18, 2005 issue of the Florida Administrative Weekly.

IT-1.001 Division of Cultural Affairs

(18)(a)2. Eligible applicants must submit a completed Fellowship application form (CA2E012, eff. 6/8/05, incorporated by reference and available from the Division, 1001 DeSoto Park Drive, Tallahassee, Florida 32301); with all required samples of work in the discipline appropriate formats described in the program guidelines, on or before the announced postmark deadline. Samples of work must be original and authentic representations of the applicant's work. Applications will be accepted in each discipline on a rotating cycle. The disciplines of visual arts and media arts will apply together in odd years while the disciplines of literature, folk arts, music, interdisciplinary, dance and theatre will apply in even years. In the event that additional funding becomes available and all disciplines can be accommodated in one application cycle, the two discipline groups will be combined. THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Morgan Barr, Division of Cultural Affairs, 1001 DeSoto Park Drive, Tallahassee, Florida 32301

DEPARTMENT OF EDUCATION

Florida School for the Deaf and the Blind

RULE NO.: RULE TITLE:
6D-7.006 Pupil Progression Plan

NOTICE OF WITHDRAWAL

Notice is hereby given that the above proposed rule amendment published in The Florida Administrative Weekly, Vol. 31, No. 4, January 28, 2005, has been withdrawn.

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."

PUBLIC SERVICE COMMISSION

DOCKET NO. 991473-TP

RULE NO.: RULE TITLE:
25-4.085 Service Guarantee Program

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rules in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 30, No. 52, December 23, 2004, issue of the Florida Administrative Weekly:

25-4.085 Service Guarantee Program.

A company may petition the Commission for approval of a Service Guarantee Program, which would relieve the company from the rule requirement of each service standard addressed in the approved Service Guarantee Program. When evaluating a Service Guarantee Program for approval, the Commission will

consider the Program's benefits to the customers and whether the Program is in the public interest. The Commission shall have the right to enforce the provisions of the Service Guarantee Plan.

Specific Authority 350.127(2) FS. Law Implemented 364.01, 364.01(4), 364.03, 364.035, 364.036, 364.386 FS. History--New _____

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

Division of Medical Quality Assurance

RULE NO.: RULE TITLE:
64B-1.016 Fees: Examination and Post-Examination Review

NOTICE OF CHANGE

Notice is hereby given that the following change has been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., Notice of Proposed Rulemaking published in Vol. 31, No. 3, January 21, 2005, issue of the Florida Administrative Weekly, and Notice of Change published in Vol. 31, No. 14, April 8, 2005, issue of the Florida Administrative Weekly. The change is in response to comments received from the Joint Administrative Procedures Committee.

In (1)(a) the portion of the text of the rule on Exam Fees, Dental Clinical, shall be changed as follows:

Dental Clinical \$1,200.00

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Karen Weaver, Testing Services Manager, 4052 Bald Cypress Way, Bin #C90, Tallahassee, Florida 32399-1703

DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

RULE NO.: RULE TITLE:
64B-4.002 Office Surgery Inspection Fee

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 31, No. 8, February 25, 2005, issue of the Florida Administrative Weekly. The changes are in response to comments received from the Joint Administrative Procedures Committee.

The text of the rule shall now read as follows:

64B-4.002 Office Surgery Inspection Fee.

An inspection fee of \$1500 shall be paid annually for each practice location required to be inspected, pursuant to Rule 64B8-9.0091 or Rule 64B15-14.0076, F.A.C. Each practice

location will be assessed the above referenced fee at the time of inspection regardless of the number of physicians who share this office location.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Pamela King, Executive Director, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399

DEPARTMENT OF HEALTH

Board of Optometry

RULE NO.: 64B13-18.002
 RULE TITLE: Formulary of Topical Ocular
 Pharmaceutical Agents

FOURTH NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 30, No. 21, of the May 21, 2004, issue of the Florida Administrative Weekly. The changes are in response to a public hearing held on this rule on April 6, 2005, in Ft. Lauderdale, Florida. This Notice of Change supercedes all language contained in the previous Notices of Change which published in Vol. 30, No. 29, of the July 16, 2004, FAW; Vol. 30, No. 53, of the December 30, 2004, FAW; and Vol. 31, No. 9, of the March 4, 2005, FAW.

When changed, the rule shall read as follows:

64B13-18.002 Formulary of Topical Ocular
 Pharmaceutical Agents.

The topical ocular pharmaceutical formulary consists of pharmaceutical agents which a certified optometrist is qualified to administer and prescribe in the practice of optometry pursuant to Section 463.0055(2)(a), Florida Statutes. The topical ocular pharmaceutical agents in the formulary include the following legend drugs alone or in combination in concentrations up to those specified, or any lesser concentration that is commercially available:

(1) CYCLOPLEGIC AND MYDRIATICS

- (a) Atropine sulfate – 1.0% (solution and ointment);
- (b) Phenylephrine HCl – 2.5%;
- (c) Cyclopentolate HCl – 0.5%, 1.0%;
- (d) Scopolamine HBr – 0.25%;
- (e) Homatropine HBr – 2.0%, 5.0%;
- (f) Tropicamide – 0.5%, 1.0%; and
- (g) Hydroxyamphetamine HBr – 1.0% plus tropicamide – 0.25%.

(2) LOCAL ANESTHETICS

- (a) Tetracaine – 0.5%;
- (b) Proparacaine HCl – 0.5%; and
- (c) Benoxinate HCl – 0.4% (in combination with fluorescein).

(3) DIAGNOSTIC PRODUCTS

Fluorescein paper strips – 1mg, 9mg per strip.

(4) ANTIBACTERIAL

- (a) Erythromycin – 0.5%;
- (b) Bacitracin – 400 units/g, 500 units/g (ointment alone and in combination);
- (c) Polymyxin – 10,000 units/g (only in combination);
- (d) Neomycin – 1.75mg/g, 1.75mg/ml, 3.50mg/g (only in combination);
- (e) Gentamicin – 0.3% (solution and ointment);
- (f) Tobramycin – 0.3% (solution and ointment in combination);
- (g) Gramicidin – 0.025mg/ml (only in combination);
- (h) Ciprofloxacin HCl – 0.3% (solution and ointment);
- (i) Trimethoprim – 1.0mg/ml (only in combination);
- (j) Ofloxacin – 0.3%;
- (k) Levofloxacin – 0.05%;
- (l) Gatifloxacin – 0.3%;
- (m) Moxifloxacin – 0.5%; and
- (n) Sodium sulfacetamide – 10.0% (alone and in combination).

(5) NON-STEROIDAL AND STEROIDAL ANTI-INFLAMMATORY AGENTS

- (a) Medrysone – 1.0%;
- (b) Prednisolone acetate – 0.12%, 0.125%, 0.2%, 0.5%, 0.6%, 1.0% (alone and in combination);
- (c) Prednisolone sodium phosphate – 0.125%, 0.25%, 1.0% (alone and in combination);
- (d) Fluometholone – 0.1%, 0.25% (suspension and ointment, alone and in combination);
- (e) Dexamethasone – 0.1%, 1.0% (alone and in combination);
- (f) Dexamethasone sodium phosphate – 0.1% (solution and ointment);
- (g) Fluorometholone acetate – 0.1%;
- (h) Rimexolone – 1.0%;
- (i) Loteprednol etabonate – 0.2%, 0.5% (alone and in combination);
- (j) Diclofenac sodium – 0.1%;
- (k) Ketorolac tromethamine – 0.4%, 0.5%; and
- (l) Hydrocortisone – 1.0% (only in combination).

(6) ANTIHISTAMINES, MAST CELL STABILIZERS AND ANTI-ALLERGY AGENTS

- (a) Cromolyn sodium – 4.0%;
- (b) Lodoxamide tromethamine – 0.1%;
- (c) Olopatadine HCl – 0.1%;
- (d) Nedocromil sodium- 2.0%;
- (e) Ketotifen fumarate – 0.025%;
- (f) Azelastine HCl – 0.05%;
- (g) Pemirolast potassium – 0.1%; and
- (h) Epinastine HCl – 0.05%.

(7) ANTIVIRAL AGENTS

Trifluridine – 1.0%.

(8) ANTI-GLAUCOMA AGENTS

- (a) Beta Blockers
 - 1. Betaxolol HCl – 0.25%, 0.5%;
 - 2. Levobunolol HCl – 0.25%, 0.5%;
 - 3. Metipranolol HCl – 0.3%;
 - 4. Timolol maleate or hemihydrate – 0.25%, 0.5% (solution and gel, alone and in combination);
 - 5. Carteolol HCl – 1.0%;
- (b) Miotics, Direct-acting
 - 1. Carbachol – 0.75%, 1.5%, 3.0%;
 - 2. Pilocarpine HCl – 0.5%, 1.0%, 2.0%, 4.0%; and
 - 3. Pilocarpine gel – 4.0%.
- (c) Prostaglandins
 - 1. Latanoprost – 0.005%;
 - 2. Bimatoprost – 0.03%; and
 - 3. Travoprost – 0.004%.
- (d) Alpha₂ Adrenergic Agonist
 - 1. Brimonidine tartrate – 0.15%, 0.2%; and
 - 2. Apraclonidine HCl – 0.5%.
- (e) Carbonic Anhydrase Inhibitors (CAIs)
 - 1. Brinzolamide – 1.0%; and
 - 2. Dorzolamide HCl – 2.0% (alone and in combination).
- (9) MISCELLANEOUS
 - (a) Hydroxypropyl cellulose ophthalmic Insert
 - (b) Dapiprazole – 0.5%; and
 - (c) Cyclosporine emulsion – 0.05%.

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

DEPARTMENT OF HEALTH

Board of Orthotists and Prosthetists

RULE NO.: 64B14-3.001 RULE TITLE: Definitions

NOTICE OF WITHDRAWAL

Notice is hereby given that the above rule, as noticed in the Vol. 31, No. 2, January 14, 2005, Florida Administrative Weekly has been withdrawn.

DEPARTMENT OF HEALTH

Board of Pharmacy

RULE NO.: 64B16-28.150 RULE TITLE: Record Maintenance Systems for Institutional and Animal Shelter Permits

NOTICE OF WITHDRAWAL

Notice is hereby given that the above rule, as noticed in Vol. 31, No. 13, April 1, 2005, Florida Administrative Weekly has been withdrawn.

DEPARTMENT OF FINANCIAL SERVICES

Division of Insurance Fraud

RULE CHAPTER NO.:	RULE CHAPTER TITLE:
69D-1	Anti-Fraud Reward Program
RULE NO.:	RULE TITLE:
69D-1.003	Review Process and Reward Criteria

NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed Rule 69D-1.003, F.A.C., in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 30, No. 43, October 22, 2004, of the Florida Administrative Weekly. These changes are being made to address concerns expressed by the Joint Administrative Procedures Committee.

The rule section enumerated above is changed to read:

69D-1.003 Review Process and Reward Criteria.

(1) through (3) No change.

(4) Only a single reward amount will be granted, per investigation, provided that the case qualifies for a reward pursuant to the criteria in Rule 69L-1.003, F.A.C. Additionally, this amount may be divided among multiple Anti-Fraud Reward Applicants where applicable.

(5) A reward may only be given if information was submitted by an applicant to the Division of Insurance Fraud on or after October 1, 1999, and such information led to the arrest and conviction of a person who committed a complex or organized crime investigated by the Division arising from a violation Sections 440.105, 624.15, 626.9541, 626.989, or 817.234, F.S. In determining the amount of the reward to be awarded, the Department will consider the factors in subsections 69L-1.003(7) and (8), F.A.C.

(6) through (8) No change.

(9) Subject to the reward process and criteria identified in Rule 69L-1.003, F.A.C., rewards shall be paid pursuant to the following schedule:

(a) A reward of up to \$25,000 will be granted for information leading to a conviction arising from a violation of an applicable criminal statute when the case is valued at \$1,000,000 or more.

(b) A reward of up to \$10,000 will be granted for information leading to a conviction arising from a violation of an applicable criminal statute when the case is valued at \$100,000 or more but less than \$1,000,000.

(c) A reward of up to \$5,000 will be granted for information leading to a conviction arising from a violation of an applicable criminal statute when the case is valued at \$20,000 or more but less than \$100,000.

(d) A reward of up to \$1,000 will be granted for information leading to a conviction arising from a violation of an applicable criminal statute when the case is valued at \$20,000 or less but more than \$5,000.

(e) A reward of up to \$500 will be granted for information leading to a conviction arising from a violation of an applicable criminal statute when the case is valued at \$5,000 or less.

(f) \$250,000 has been allocated to pay rewards. In the event the allocated \$250,000 has been distributed, no further rewards shall be granted.

(10) No change.

The remainder of the rule reads as previously published.

Section IV Emergency Rules

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 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.”

FISH AND WILDLIFE CONSERVATION COMMISSION

Vessel Registration and Boating Safety

RULE TITLE:

Emergency Idle Speed No Wake Boating Restricted Areas – Suwannee and Sante Fe Rivers

RULE NO.:

68DER05-1

STATEMENT OF THE SPECIFIC FACTS AND REASONS FOR FINDING AN IMMEDIATE DANGER TO THE PUBLIC HEALTH, SAFETY, AND WELFARE: Continuing rains have caused the rise of the Suwannee and Sante Fe Rivers, and in many instances are flooding or less than five (5') feet from flood stage. This condition will create an immediate danger to vessels transiting the area. Objects previously well above the water and objects previously on dry land have become wholly or partially submerged, creating hazards to navigation. These objects include without limitation, dwellings, electrical and telephone wires, utility poles, trees and stumps, docks and wharfs, boathouses, and sheds. The turbulent and muddy water has caused boats to allide dangerously upon submerged objects without warning.

The operation of any vessel, other than emergency or law enforcement vessels, at speeds greater than Idle Speed No Wake will continue to create an immediate danger to property engulfed by the floodwaters or adjacent to the swollen river.

Vessel operation, other than by emergency or law enforcement vessels, at speeds greater than Idle Speed No Wake, will continue to increase the damage caused by the floodwaters and will damage property that is marginally above the floodwaters. Vessel operation, other than by emergency or law enforcement vessels, at speeds greater than Idle Speed No Wake, also presents an immediate danger to persons in or near the river. The flood can submerge accustomed footpaths and handholds. These submerged areas could cause persons to slip and fall, perhaps into the river. Under these circumstances, there is a substantial likelihood of injury or death.

STATEMENT OF THE AGENCY’S REASONS FOR CONCLUDING THAT THE PROCEDURE USED IS FAIR UNDER THE CIRCUMSTANCES: There is general concurrence from Hamilton, Suwannee, Lafayette, Madison, Gilchrist, Dixie, and Columbia Counties, the Florida Fish & Wildlife Conservation Commission Field Office in Lake City, Florida, and the Boating and Waterways Section, that the enactment of an Idle Speed No Wake boating safety zone along the Suwannee and Sante Fe Rivers as a means to protect against continued flooding of homes, submersion of docks, seawalls, environmental damage including erosion, degradation of water quality, introduction of pollutants into the river system, and the undermining of trees and other vegetation are warranted for the protection of public safety. Additionally, within the regulated area, homes have been evacuated and families displaced to shelters due to flooding.

This emergency rulemaking is being coordinated with the United States Coast Guard and the Army Corps of Engineers. The emergency rule will be forwarded to the United States Coast Guard Seventh and Eighth Districts for publication in their weekly Local Notice to Mariners. The boating public will be notified by publication in the local notice, by marine VHF radio broadcast of the Coast Guard’s local notice, by personal contact from law enforcement officers, and by regulatory markers and other signs posted at boat ramps and other access points to the boating restricted areas.

Because the water levels on the Suwannee and Sante Fe Rivers are in constant flux, varying in response to wind directions, wind speed and accumulated rainfall, the danger to life and property is such that normal rulemaking procedures would not adequately protect the public from the anticipated harm. The procedures used in this emergency rulemaking action are therefore fair under the circumstances.

SUMMARY OF THE RULE: This action establishes four Idle Speed No Wake boating restricted areas along the Suwannee and Sante Fe Rivers, shoreline to shoreline, from the Suwannee River at Ellaville, south to the confluence of the Suwannee and Sante Fe Rivers and continuing along the Suwannee River to Fowler Bluff, and along the Sante Fe River from its confluence with the Suwannee River to O’Leno State Park.

THE PERSON TO BE CONTACTED REGARDING THE EMERGENCY RULE IS: Ms. Tara Alford, Boating and Waterways Section, Florida Fish and Wildlife Conservation Commission, 620 South Meridian Street, Tallahassee, Florida 32399

THE FULL TEXT OF THE EMERGENCY RULE IS:

68DER05-1 Emergency Idle Speed No Wake Boating Restricted Areas – Suwannee and Sante Fe Rivers.

(1) For the purpose of regulating the speed and operation of vessel traffic at Idle Speed No Wake from shoreline to shoreline on the Suwannee and Sante Fe Rivers, the following Boating Restricted Areas are established:

(a) On the Suwannee River from Ellaville south to Luraville when the Suwannee River level is 47 feet or higher as indicated on the gauge at Ellaville.

(b) On the Suwannee River from Luraville to Rock Bluff when the Suwannee River level is 22 feet or higher as indicated on the gauge at Branford.

(c) On the Suwannee River from Rock Bluff southerly to Wilcox (near Fanning Springs) and continuing southerly to Fowler Bluff when the Suwannee River level is 9 feet or higher as indicated on the gauge at Wilcox.

(d) On the Sante Fe River from O’Leno State Park westerly to the confluence of the Suwannee and Sante Fe Rivers when the Sante Fe River is 19 feet or higher as indicated on the gauge at Three Rivers Estates.

(2) As provided in Section 327.70, F.S., this emergency rule shall be enforced by the Division of Law Enforcement of the Fish and Wildlife Conservation Commission and its officers, the sheriffs of the various counties through which these waters flow and their respective deputies, and any other duly constituted law enforcement officers.

(3) Any person failing to comply with the provision of this emergency rule shall be guilty of a noncriminal infraction, punishable as provided in Section 327.73, F.S.

(4) This emergency rule takes effect immediately upon being filed with the Department of State will continue in effect:

(a) Until the segments of the Suwannee and Sante Fe Rivers have receded below the river levels specified in subsection (1); or

(b) Until the Executive Director of the Agency finds that the flooding conditions have sufficiently abated so that the restrictions are no longer justified; or

(c) Until 45 days have elapsed.

Specific Authority 327.04, 327.46 FS. Law Implemented 327.46 FS. History—New 4-12-05.

THIS RULE TAKES EFFECT UPON BEING FILED WITH THE DEPARTMENT OF STATE UNLESS A LATER TIME AND DATE IS SPECIFIED IN THE RULE.

EFFECTIVE DATE: April 12, 2005

Section V Petitions and Dispositions Regarding Rule Variance or Waiver

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.”

WATER MANAGEMENT DISTRICTS

NOTICE IS HEREBY GIVEN that on April 5, 2005 South Florida Water Management District (District), received a petition for waiver from Joseph and Louise Daleo, Application Number 05-0405-3 for issuance of a Standard Right of Way Occupancy Permit for utilization of Works or Lands of the District known as the Golden Gate Main Canal, Collier County, for the installation of a dock located at the rear of 3751 Recreation Lane, Naples, FL 34116, Section 28, Township 49 South, Range 26 East. The petition seeks relief from paragraph 40E-6.221(2)(j), F.A.C., which governs the minimum low member elevation of pile-supported docking facilities within the Works or Lands of the District.

A copy of the petition may be obtained from Kathie Ruff, (561)682-6320, e-mail: kruff@sfwmd.gov.

The District will accept comments concerning the petition for 14 days from the date of publication of this notice. To be considered, comments must be received by the end of business on the 14th day at the South Florida Water Management District, 3301 Gun Club Road, MSC 1410, West Palm Beach, FL 33408, Attn: Kathie Ruff, Office of Counsel.

NOTICE IS HEREBY GIVEN that on April 5, 2005 South Florida Water Management District (District) received a petition for waiver from Richard B. Rice, Application Number 05-0405-4 for issuance of a Standard Right of Way Occupancy Permit for utilization of Works or Lands of the District known as the Golden Gate Main Canal, Collier County, for the installation of a dock located at the rear of 3747 Recreation Lane, Naples, FL 34116, Section 28, Township 49 South, Range 26 East. The petition seeks relief from paragraph 40E-6.221(2)(j), F.A.C., which governs the minimum low member elevation of pile-supported docking facilities within the Works or Lands of the District.

A copy of the petition may be obtained from Kathie Ruff, (561)682-6320, e-mail: kruff@sfwmd.gov.

The District will accept comments concerning the petition for 14 days from the date of publication of this notice. To be considered, comments must be received by the end of business on the 14th day at the South Florida Water Management District, 3301 Gun Club Road, MSC 1410, West Palm Beach, FL 33408, Attn: Kathie Ruff, Office of Counsel.

NOTICE IS HEREBY GIVEN that on April 5, 2005 South Florida Water Management District (District) received a petition for waiver from Gerald L. Buckley, Application Number 05-0405-5 for issuance of a Standard Right of Way Occupancy Permit for utilization of Works or Lands of the District known as the Golden Gate Main Canal, Collier County, for the installation of a dock located at the rear of 3763 Recreation Lane, Naples, FL 34116, Section 33, Township 49 South, Range 26 East. The petition seeks relief from paragraph 40E-6.221(2)(j), F.A.C., which governs the minimum low member elevation of pile-supported docking facilities within the Works or Lands of the District.

A copy of the petition may be obtained from Kathie Ruff, (561)682-6320, e-mail: kruff@sfwmd.gov.

The District will accept comments concerning the petition for 14 days from the date of publication of this notice. To be considered, comments must be received by the end of business on the 14th day at the South Florida Water Management District, 3301 Gun Club Road, MSC 1410, West Palm Beach, FL 33408, Attn: Kathie Ruff, Office of Counsel.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

NOTICE IS HEREBY GIVEN that on April 5, 2005, the Division of Hotels and Restaurants received a Petition for Emergency Variance for paragraph 61C-1.004(1)(d), F.A.C., from Stod Company (Dippin Dots) located in Daytona Beach. The above referenced F.A.C. states that sewage shall be disposed of in a public sewerage system or other approved sewerage system in accordance with the provisions of Chapter 64E-6 or 62-601, F.A.C. Petitioner is requesting a variance to not have hard plumbing in their kiosk and use alternative methods for sewage disposal.

A copy of the Petition can be obtained from: Xenia Bailey, Division of Hotels and Restaurants, 1940 North Monroe Street, Tallahassee, Florida 32399-1013.

The Division of Hotels and Restaurants will accept comments concerning the Petition for 14 days from the date of publication of this notice. To be considered, comments must be received on or before 5:00 p.m.

The Bureau of Elevator Safety hereby gives notice that it has issued an Order Denying Emergency Variance Request in response to a petition filed on March 8, 2005, by Brint Adams of KONE Inc. regarding Verandas Condominium, seeking a waiver from ASME A17.1 Part V, 1996 Edition with 1997 Addenda, as adopted by Rule 61C-5.001, F.A.C. The petitioner requested to install a residential elevator in a nonresidential area.

A copy of the Order can be obtained from: Agency Clerk, Department of Business and Professional Regulation, 1940 North Monroe Street, Tallahassee, Florida 32399-2202.

The Bureau of Elevator Safety hereby gives notice that it has Issued an Order Granting Variance Request in response to a petition filed on April 1, 2005, by Lee Rigby of Vertical Assessment Associates regarding Hubbard Marina Redevelopment, seeking a waiver from Rule Chapter 100.3a, 101.6, 105.1, 105.3b, 105.3c, 107.1e, 200.4a, and 204.1e (2)(c), A.S.M.E. 17.1, 1996 edition with 1997 Addenda, as adopted by Rule 61C-5.001, F.A.C., requiring access to the overspeed governor from outside the hoistway, prohibiting the machine and control room from being within the hoistway, to allow the use of guide rails to support the loads and stresses, reduce the clearance above the car, allow additional loads be calculated prior to obtaining minimum bracket spacing requirements from the published table and to allow a cartop emergency hatch openable by a restricted use key.

A copy of the Order can be obtained from: Agency Clerk, Department of Business and Professional Regulation, 1940 North Monroe Street, Tallahassee, Florida 32399-2202.

The Bureau of Elevator Safety hereby gives notice that it has Issued an Order Granting Emergency Variance Request in response to a petition filed on March 11, 2005, by Lee Rigby of Vertical Assessment Associates regarding PGT Industries, seeking a waiver from Rule 2001.7a 4 of ASME A17.1, 1996 Edition with 1997 Addenda, as adopted by Rule 61C-5.001, F.A.C. The petitioner requested to have a vertical wheelchair lift exceed 12 feet of travel by 2 feet.

A copy of the Order can be obtained from: Agency Clerk, Department of Business and Professional Regulation, 1940 North Monroe Street, Tallahassee, Florida 32399-2202.

NOTICE IS HEREBY GIVEN that on March 30, 2005, Bureau of Elevator Safety received a Petition for Variance from ASME A.17.1, Sections 100.3a and 101.6 and ASME A17.2, Section 2.29.2, as adopted by Rule 61C-5.001, F.A.C., which prohibit the locating the elevator motor in the hoistway, require hands-on access to the governor and convenient, direct line-of-sight visual contact with the drive sheave. The petition was received from Steve Powell of KONE Inc, requesting a

variance to allow the installation of MonoSpace® elevator systems in the following location: Moffit West Clinic Expansion (Petition VW 2005-036).

A copy of the Petition can be obtained from: Mark Boutin, Bureau of Elevator Safety, 1940 North Monroe Street, Tallahassee, Florida 32399-1013.

The Bureau of Elevator Safety will accept comments concerning the Petition for 14 days from the date of publication of this notice. To be considered, comments must be received on or before 5:00 p.m.

NOTICE IS HEREBY GIVEN that on April 1, 2005, Bureau of Elevator Safety received a Petition for Variance from Chapter 100.3a, 101.6, 105.1, 105.3b, 105.3c, 107.1e, 200.4a, and 204.1e (2)(c), A.S.M.E. 17.1, 1996 edition with 1997 Addenda, as adopted by Rule 61C-5.001, F.A.C., requiring access to the overspeed governor from outside the hoistway, prohibiting the machine and control room from being within the hoistway, to allow the use of guide rails to support the loads and stresses, reduce the clearance above the car, allow additional loads be calculated prior to obtaining minimum bracket spacing requirements from the published table and to allow a cartop emergency hatch openable by a restricted use key. The petition was received from Lee Rigby of Vertical Assessment Associates on behalf of Hubbard's Marina Redevelopment, Madeira Beach, Florida (Petition VW 2005-038).

A copy of the Petition can be obtained from: Mark Boutin, Bureau of Elevator Safety, 1940 North Monroe Street, Tallahassee, Florida 32399-1013.

The Bureau of Elevator Safety will accept comments concerning the Petition for 14 days from the date of publication of this notice. To be considered, comments must be received on or before 5:00 p.m.

NOTICE IS HEREBY GIVEN that on April 5, 2005, the Bureau of Elevator Safety received a Petition for Variance from Rules 101.1a (2), 101.1a (3), 101.6, 212.1, 212.9a, A.S.M.E. 17.1, 1996 edition with 1997 Addenda, as adopted by Rule 61C-5.001, F.A.C., which require a machine room, steel ropes and non welded terminations, from Kenin Lynes of Otis Elevator Company. The Petitioner is requesting a variance to allow the installation of Gen2™ elevator systems in the following locations: Paradise Pointe Condominium Project (Petition VW 2005-039).

A copy of the Petitions can be obtained from: Mark Boutin, Bureau of Elevator Safety, 1940 North Monroe Street, Tallahassee, Florida 32399-1013.

The Bureau of Elevator Safety will accept comments concerning the Petition for 14 days from the date of publication of this notice. To be considered, comments must be received on or before 5:00 p.m.

NOTICE IS HEREBY GIVEN that on April 6, 2005, Bureau of Elevator Safety received four Petitions for Variance from ASME A.17.1, Sections 100.3a and 101.6 and ASME A17.2, Section 2.29.2, as adopted by Rule 61C-5.001, F.A.C., which prohibit the locating the elevator motor in the hoistway, require hands-on access to the governor and convenient, direct line-of-sight visual contact with the drive sheave. The petition was received from Steve Powell of KONE Inc, requesting a variance to allow the installation of MonoSpace® elevator systems in the following locations: Solomon Tropp Office Building, Tampa (Petition VW 2005-040), Manatee Memorial Parking Garage, Bradenton (VW2005-041), Blake Medical Parking Garage, Bradenton (VW 2005-02) and Dunedin Station Square, Dunedin (VW 2005-043).

A copy of the Petition can be obtained from: Mark Boutin, Bureau of Elevator Safety, 1940 North Monroe Street, Tallahassee, Florida 32399-1013.

The Bureau of Elevator Safety will accept comments concerning the Petition for 14 days from the date of publication of this notice. To be considered, comments must be received on or before 5:00 p.m.

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

The Board of Acupuncture hereby gives notice that it has issued an Order, filed March 23, 2005, granting the Petition for Waiver filed by Paul Sweeney. The Notice of Petition for Waiver was published February 18, 2005 in Vol. 31, No. 7, F.A.C. The Board considered the Petition at its meeting held on March 11, 2005, in Orlando, Florida.

A copy of the Board's Order may be obtained by contacting: Board of Acupuncture, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256.

The Board of Clinical Laboratory Personnel hereby gives notice that it has received a Petition for Variance or Waiver filed on April 12, 2005 by Christopher Gerz. Petitioner seeks a variance of the provisions of Rule 64B3-2.003, F.A.C. Specifically, the Petitioner requests that the Board accept as pertinent clinical laboratory experience the experience that Petitioner has attained in an exclusive use laboratory environment.

Copies of the petition may be obtained by writing: Joe Baker, Jr., Executive Director, Board of Clinical Laboratory Personnel, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3259.

The Board of Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling hereby gives notice that it has received a Petition for Variance or Waiver filed on April 6, 2005 by Paula Rodriguez, M.A., N.C.C., Mental Health Counselor Intern. Petitioner seeks a variance of the provisions of Rule 64B4-2.002, F.A.C. Specifically, the Petitioner requests that the Board adjust the requirement of 1 hour of supervision every two weeks to that which will meet the needs of her specific disability.

Copies of the petition may be obtained by writing: Susan Foster, Executive Director, Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258.

The Board of Dentistry hereby gives notice that it has received a Petition, filed on April 1, 2005, from Allen R. Grossman, Esquire, on behalf of Leandro Britto, D.D.S., seeking a waiver or variance of subsection 64B5-2.0146(2), F.A.C., with respect to the requirement the applicant successfully complete remediation to the level of a graduating senior and obtain a letter from the dean of the dental school.

Comments on this Petition should be filed with the Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258, within 14 days of publication of this notice.

For a copy of the Petition, contact: Sue Foster, Executive Director, Board of Dentistry, at above address or telephone (850)245-4474.

The Board of Dentistry hereby gives notice that it has received a Petition, filed on March 28, 2005, from Edwin A. Bayo, Esquire, on behalf of Walter J. Simbaco, D.D.S., seeking a waiver or variance of subsection 64B5-2.0146(2), F.A.C., with respect to the requirement the applicant successfully complete remediation to the level of a graduating senior and obtain a letter from the dean of the dental school.

Comments on this Petition should be filed with the Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258, within 14 days of publication of this notice.

For a copy of the Petition, contact: Sue Foster, Executive Director, Board of Dentistry, at above address or telephone (850)245-4474.

The Board of Dentistry hereby gives notice that it has received a Petition, filed on March 28, 2005, from Edwin A. Bayo, Esquire, on behalf of Guillermo E. Chacon, seeking a waiver or variance of subsection 64B5-2.0146(2), F.A.C., with respect to the requirement the applicant successfully complete remediation to the level of a graduating senior and obtain a letter from the dean of the dental school.

Comments on this Petition should be filed with the Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258, within 14 days of publication of this notice.

For a copy of the Petition, contact: Sue Foster, Executive Director, Board of Dentistry, at above address or telephone (850)245-4474.

The Board of Dentistry hereby gives notice that it has received a Petition, filed on April 1, 2005, from Edwin A. Bayo, Esquire, on behalf of Joaquin Zagarra, D.D.S., seeking a waiver or variance of Rules 64B5-7.005 and 64B5-2.021, F.A.C., with respect to requirements for passing the clinical examination for the purpose of a teaching permit and obtaining additional education after three examination attempts.

Comments on this Petition should be filed with the Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258, within 14 days of publication of this notice.

For a copy of the Petition, contact: Sue Foster, Executive Director, Board of Dentistry, at above address or telephone (850)245-4474.

The Board of Medicine hereby gives notice that it has received a petition filed on April 1, 2005, on behalf of Dalvin R. Lane, M.D., seeking a waiver from Rule 64B8-5.001, F.A.C., with regard to the time frames imposed for passage of the USMLE.

Comments on this petition should be filed with Board of Medicine, MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253, within 14 days of publication of this notice.

For a copy of the petition, contact: Larry G. McPherson, Jr., Executive Director, Board of Medicine, at above address or telephone (850)245-4131.

The Board of Medicine hereby gives notice that it has received a petition filed on March 28, 2005, on behalf of Michael Salav, M.D., seeking a waiver from Rule 64B8-9.005, F.A.C., with regard to the required procedures for healthcare professionals who are infected with hepatitis B or the human immunodeficiency virus.

Comments on this petition should be filed with Board of Medicine, MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253, within 14 days of publication of this notice.

For a copy of the petition, contact: Larry G. McPherson, Jr., Executive Director, Board of Medicine, at above address or telephone (850)245-4131.

The Board of Osteopathic Medicine hereby gives notice that it has received a petition for waiver or variance filed on April 4, 2005, on behalf of Julie Schindler, D.O. The petition seeks a waiver or variance from paragraph 64B15-19.005(3)(d), F.A.C., with regard to the requirements for supervision/monitoring by an osteopathic physician, licensed under Chapter 459, F.S. The Petitioner seeks to have a physician licensed under Chapter 458, F.S., as her supervising/monitoring physician.

Comments on this petition should be filed with Board of Osteopathic Medicine, MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256, within 14 days of publication of this notice.

For a copy of the petition, contact: Pamela King, Executive Director, Board of Osteopathic Medicine, at above address or telephone (850)245-4444.

Section VI Notices of Meetings, Workshops and Public Hearings

DEPARTMENT OF STATE

The **Department of State, Division of Cultural Affairs** announces an Ad Hoc Budget Committee Meeting of the Florida Arts Council to be held by conference call to which all persons are invited:

DATE AND TIME: May 2, 2005, 2:00 p.m.

PLACE: Division of Cultural Affairs, 1001 DeSoto Park Drive, Tallahassee, FL 32301

GENERAL SUBJECT MATTER TO BE CONSIDERED: Ad Hoc Budget Committee Meeting of the Florida Arts Council.

For more information, contact: Linda Downey, Director, Division of Cultural Affairs, 1001 DeSoto Park Drive, Tallahassee, FL 32301, (850)245-6481.

Should any person wish to appeal any decision made with respect to any matter considered at the above-referenced meeting, s/he may need to ensure a verbatim recording of the proceedings in order to provide a record for judicial review.

Pursuant to the provisions of the Americans with Disabilities Act, persons with disabilities are asked to contact the Division office no later than one week prior to each panel meeting to request accommodations. Accommodations can be arranged through Dana DeMartino, ADA Coordinator, Division of Cultural Affairs, (850)245-6477, Fax (850)245-6497, e-mail: ddemartino@dos.state.fl.us.

DEPARTMENT OF LEGAL AFFAIRS

The Florida **Commission on the Status of Women** will hold telephone conference calls to which all interested persons are invited to participate.

FCSW Foundation Committee

DATE AND TIME: April 28, 2005, 11:00 a.m.

NACW Convention Committee

DATE AND TIME: May 3, 2005, 10:00 a.m.

PLACE: Please call (850)414-3300 for instructions on participation

GENERAL SUBJECT MATTER TO BE CONSIDERED: To discuss general issues.

If you need an accommodation because of disability in order to participate, please notify FCSW 5 days in advance at Office of the Attorney General, The Capitol, Tallahassee, FL 32399-1050.

Note: If a quorum of members does not attend, items on this agenda will be discussed as a workshop by those present, and notes will be recorded although no formal action will be taken. If you have any questions, please call (850)414-3300.

DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

The Florida **Department of Agriculture and Consumer Services** announces a public meeting to which all persons are invited.

DATE AND TIME: May 11, 2005, 1:00 p.m. – 4:00 p.m.

PLACE: Steinbrenner's Ramada Inn, I-75 at US 27, Ocala, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: This is a meeting of the Florida Propane Education, Safety and Research Council and representatives of the Florida Dept. of Agriculture and Consumer Services to discuss current and proposed Council programs and budget issues.

Additional information may be obtained by writing: Vicki O'Neil, Bureau Chief, Bureau of LP Gas Inspections, 3125 Conner Blvd., Suite N, Tallahassee, FL 32399-1650, (850)921-8001.

Pursuant to the Americans with Disabilities Act, any person requiring special accommodations to participate in this meeting is asked to advise the agency at least 48 hours in advance by contacting Ms. O'Neil at the number above.

The Florida **Department of Agriculture and Consumer Services** announces the meeting of the Florida Viticulture Advisory Council:

DATES AND TIMES: Monday, May 2, 2005, 2:00 p.m.; Tuesday, May 3, 2005, 9:00 a.m.

PLACE: Osprey Motel, Conference Room, 15801 Front Beach Rd., Panama City Beach, Florida 32407

GENERAL SUBJECT MATTER TO BE CONSIDERED: VAC Board Meeting – The purpose of this meeting is to conduct the general business of the Florida Viticulture Advisory Council.

For additional information or if you need special accommodations, call: Richard Menendez, (850)488-4277.

The Florida **Department of Agriculture and Consumer Services** announces a meeting of the Florida Sturgeon Production Working Group to which all interested persons are invited.

DATE AND TIME: May 19, 2005, 10:00 a.m. – 12:00 Noon

PLACE: Mote Aquaculture Park, 12300 Fruitville Road, Sarasota, Florida 34240

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Florida Sturgeon Production Working Group is responsible for coordinating the implementation of a state sturgeon production management plan to promote the commercial production and stock enhancement of sturgeon. The workshop will address administrative issues, status of commercial sturgeon production in Florida, and sturgeon production as it relates to the Endangered Species Act.

A copy of the agenda may be obtained by writing: Division of Aquaculture, 1203 Governor's Square Blvd., Fifth Floor, Tallahassee, Florida 32301.

ADA NOTICE: If an accommodation is needed for a disability in order to participate in the public workshop, please notify the Division of Aquaculture of the Department of Agriculture and Consumer Services by calling (850)488-5471, at least seven days prior to the public workshop.

The Florida **Department of Agriculture and Consumer Services, Office of Agricultural Water Policy** announces a public meeting which all interested parties are invited:

DATE AND TIME: Thursday, May 5, 2005, 2:00 p.m.

PLACE: Hendry County Agriculture Extension Office, 1085 Pratt Blvd., LaBelle, FL

GENERAL SUBJECT MATTER TO BE CONSIDERED: To discuss Citrus Best Management Practices (BMP's) for the Florida Gulf Coast Region.

For further information contact: Mr. Ken Kuhl or Mr. Randolph Smith, Office of Agricultural Water Policy, 1203 Governor Square Blvd., Suite 200, Tallahassee, Florida 32301, (850)488-6249.

If an accommodation is needed for a disability in order to participate in this meeting, please notify the Bureau of Personnel Management, Department of Agriculture and Consumer Services, (850)488-1806, at least seven days prior to the meeting.

DEPARTMENT OF EDUCATION

The State of Florida, **Department of Education, Education Practices Commission** announces a New Commission Member Training Session; the public is invited to observe (public comments will not be taken).

A New Commission Member Training Session

DATE AND TIME: May 2, 2005, 9:30 a.m.

PLACE: Homewood Suites, 2987 Apalachee Parkway, Tallahassee, Florida 32301, (850)402-9400

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Education Practices Commission considers final agency action in matters dealing with the disciplining of certified educators. This Training Session will serve to train new members of the Education Practices Commission who will sit on future Teacher and/or Administrator Hearing Panels.

Additional information may be obtained by writing: Education Practices Commission, 325 W. Gaines Street, Room 224, Turlington Building, Tallahassee, Florida 32399-0400.

SPECIAL ACCOMMODATION: Any person requiring a special impairment accommodation should contact Kathleen M. Richards, (850)245-0455, at least five (5) calendar days prior to the hearing. Persons who are hearing or speech impaired can contact the Commission using the Florida Dual Party Relay System, 711.

The State of Florida, **Department of Education, Education Practices Commission** announces a Teacher Hearing Panel; all persons are invited.

Teacher Hearing Panel

DATES AND TIMES: May 5, 2005, 9:00 a.m.; May 6, 2005, 9:00 a.m.

PLACE: Embassy Suites Tampa Airport/Westshore, 555 North Westshore Boulevard, Tampa, Florida 33609, (813)875-1555

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Hearing Panel of the Education Practices Commission will consider final agency action in matters dealing with the disciplining of certified educators.

If a person decides to appeal any decision made by the Commission with respect to any matter considered at this hearing, he or she will need to ensure that a verbatim record of the proceeding is made. The record will include the testimony and evidence upon which the appeal is to be based.

Additional information may be obtained by writing: Education Practices Commission, 325 W. Gaines Street, Room 224, Turlington Building, Tallahassee, Florida 32399-0400.

SPECIAL ACCOMMODATION: Any person requiring a special impairment accommodation should contact Kathleen M. Richards, (850)245-0455, at least five (5) calendar days prior to the hearing. Persons who are hearing or speech impaired can contact the Commission using the Florida Dual Party Relay System, 711.

The public is invited to a meeting of the Florida **Board of Governors**.

DATE AND TIME: May 6, 2005, 8:30 a.m. – 9:30 a.m.

PLACE: By Telephone Conference Call, 1605 Turlington Building, 325 W. Gaines Street, Tallahassee, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: Discussion of matters of interest to the Board of Governors being discussed by the 2005 Florida Legislature; and other matters pertaining to the Florida Board of Governors.

A copy of the agenda may be obtained from the Commissioner of Education's website: <http://www.fldoe.org>.

Persons with disabilities who require assistance to participate in the meeting are requested to notify the Office of Access and Equity, (850)245-9531 (Voice), at least 7 days in advance, so that their needs can be accommodated.

The State of Florida, **Education Standards Commission** announces public hearings to which all persons are invited. The following are the dates and sites of the regional hearings as well as a contact person and a telephone number:

DATE AND TIME: May 2, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: Pensacola Junior College, Building 14, Room 1442, 1000 College Blvd., Pensacola, FL 32504, Contact: Nettie Varnell, (850)484-2530

DATE AND TIME: May 3, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: Indian River Community College, "B" Building, Room B-120, 3209 Virginia Avenue, Fort Pierce, FL 34931, Contact: Judy Peterson, (772)462-4702

DATE AND TIME: May 4, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: Lee County School District, Dr. James A. Adams Public Education Center, 2055 Central Avenue, Ft. Myers, FL 33901, Contact: Lou McLean, (239)337-1459

DATE AND TIME: May 4, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: Miami-Dade School District, Teacher Education Center (TEC), 1080 Labaron Drive, Miami Springs, FL 33166, Contact: Teacher Education Center, (305)887-2202

DATE AND TIME: May 5, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: Alachua County School District, Kirby Smith Center Boardroom, 620 East University Avenue, Gainesville, FL 32601, Contact: Superintendent's Office, (352)955-7880

DATE AND TIME: May 5, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: St Petersburg College, Campus Meeting Center AD 180, 6605 5th Avenue, North, St. Petersburg, FL 33710, Contact: Vivian O'Dell, (727)341-4656

DATE AND TIME: May 5, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: Seminole County School Board, 400 East Lake Mary Boulevard, Sanford, FL 32773, Contact: Frankie Crews, (407)320-0009

DATE AND TIME: May 10, 2005, 4:00 p.m. – 6:00 p.m., local time

PLACE: Florida Department of Education, Room 1721/25, Turlington Building, 325 West Gaines Street, Tallahassee, FL 32399, Contact: Judy Etemadi, (850)245-0441

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Florida Education Standards Commission is soliciting your input regarding the Florida Educational Leadership Standards, the proposed Sample Key Indicators at the Entry Level. The regional public hearings are designed for you to provide your opinion(s) and suggestion(s) for modifications. The Florida Education Standards Commission members and staff will not make a formal presentation on these recommendations at the public hearings. You or your representative(s) are invited to attend any of the regional public hearings listed above and to share your ideas. We request that your remarks be typed and that a copy be given to the Commission members and/or staff at the hearing in order that your recommendations are accurately reflected.

If you or your representative cannot attend, please mail a copy of your written comments by May 10, 2005, to: Judy N. Etemadi, Ph.D., Educational Policy Consultant, Florida Education Standards Commission, Room 323, Turlington Building, 325 West Gaines Street, Tallahassee, FL 32399. The office telephone number is (850)245-0441, Fax (850)245-0657.

SPECIAL ACCOMMODATIONS: Persons with disabilities who require assistance to participate in these hearings are requested to contact Dr. Judy Etemadi at the above address or telephone number.

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."

NOTICE IS HEREBY GIVEN that a Public Workshop will be held to discuss the proposed erosion control project known as the **Navarre Beach-Berm and Dune Restoration Project**, and the establishment of an Erosion Control Line for said project. The location of the proposed erosion control project is as follows:

Section 28, Township 2 South, Range 26 West,
Gulf of Mexico, Santa Rosa County, Florida

The Public Workshop will be held as follows:

DATE AND TIME: May 4, 2005, 5:00 p.m.

PLACE: Navarre Beach Fire Station, Navarre Beach Fire Department, 1413 Utility Dr., Navarre, FL 32566

For further information contact: Mr. Peter A. Ravella, Coastal Technology Corporation, (512)236-9494, Fax 1(800)321-9673, e-mail: pravella@coastaltechcorp.com or Ms. Lois Edwards, Coastal Technology Corporation, 1(888)562-8580, Fax 1(772)562-8432, e-mail: ledwards@coastaltechcorp.com.

Notice is hereby given that the **Board of Trustees of the Internal Improvement Trust Fund** of the State of Florida, or designee, is proposing the establishment of an Erosion Control Line, pursuant to Section 161.161, F.S., and will hold a Public Hearing to which all interested persons are invited to participate.

DATE AND TIME: May 4, 2005, 6:00 p.m.

PLACE: Navarre Beach Fire Station, Navarre Beach Fire Department, 1413 Utility Dr., Navarre, FL 32566

GENERAL SUBJECT MATTER TO BE CONSIDERED: For the purpose of considering evidence bearing on the location of a proposed Erosion Control Line for the beach erosion control project known as the Navarre Beach-Berm and Dune Restoration Project. The location of the proposed Erosion Control Line is as follows:

The proposed Erosion Control Line lies along Navarre Beach, including the Navarre Beach State Recreation Area, fronting the Gulf of Mexico at the line of mean high water. The Erosion Control Line lies in Section 28, Township 2 South, Range 26 West, Gulf of Mexico, Santa Rosa County, Florida

Written objections to, or inquires regarding, the proposed Erosion Control Line should be submitted to the Bureau of Beaches and Coastal Systems, Department of Environmental Protection, 3900 Commonwealth Boulevard, Mail Station 300, Tallahassee, Florida 32399-3000, prior to the date mentioned

above. The Board of Trustees of the Internal Improvement Trust Fund of the State of Florida reserves the right to deny establishment of the Erosion Control Line.

BY ORDER OF THE BOARD OF TRUSTEES
OF THE INTERNAL IMPROVEMENT TRUST
FUND OF THE STATE OF FLORIDA
JEB BUSH, GOVERNOR

DEPARTMENT OF CITRUS

The **Department of Citrus** announces a public meeting of the Gift Fruit Advisory Council to which all persons are invited.

DATE AND TIME: Wednesday, May 4, 2005, 10:30 a.m.

PLACE: Florida Department of Citrus, 1115 E. Memorial Blvd., Lakeland, FL

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Council will meet to review and discuss proposed Gift Fruit Marketing Plans for 2005/06. The Council will also discuss any other issues that may properly come before the Council.

If you would like to attend this meeting via telephone conference you may do so by calling 1(888)461-8118.

In accordance with the Americans with Disabilities Act, any person requiring special accommodations to participate in this meeting is asked to advise the Department at least 48 hours before the meeting by contacting: Mr. Bill Jones, (863)499-2499.

FLORIDA PAROLE COMMISSION

The **Florida Parole Commission** announces a public meeting to which all persons are invited.

DATE AND TIME: Wednesday, May 4, 2005, 9:00 a.m.

PLACE: Florida Parole Commission, 2601 Blair Stone Road, Bldg. C., Third Floor, Tallahassee, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: Regularly Scheduled Meeting for all Parole, Conditional Release, Conditional Medical Release, Addiction Recovery and Control Release Matters.

Any person who decides to appeal a decision of the Florida Parole Commission with respect to a matter considered at this meeting may need to ensure that a verbatim record of the proceedings is made, Chapter 80-150, Laws of Florida (1980).

A copy of the Agenda may be obtained by writing: Florida Parole Commission, 2601 Blair Stone Road, Building C, Tallahassee, Florida 32399-2450.

In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate in this proceeding should contact the agency sending the notice not later than five working days prior to the proceeding at the address given on the notice. Telephone: (850)488-3417.

PUBLIC SERVICE COMMISSION

The Florida **Public Service Commission** will consider at its May 3, 2005, Agenda Conference, Docket No. 041263-GU, Application by Chesapeake Utilities Corporation (Chesapeake or Company) for Authorization to Issue Common Stock, Preferred Stock, and Secured and/or Unsecured Debt, and to Exceed Limitation Placed on Short-Term Borrowings in 2005. The Company filed an Application by Chesapeake Utilities Corporation for Modification of Authority to Issue Shares of Common Stock During the Twelve Months Ended December 31, 2005, on March 30, 2005, in which it requested authority to increase by 100,000 the number of shares of common stock authorized and reserved for issuance under its new Directors Stock Compensation Plan and its Employee Stock Award Plan during the twelve months ended December 31, 2005.

DATE AND TIME: Tuesday, May 3, 2005, 9:30 a.m. although the time at which this item will be heard cannot be determined at this time

PLACE: Commission Hearing Room 148, Betty Easley Conference Center, 4075 Esplanade Way, Tallahassee, Florida 32301

GENERAL SUBJECT MATTER TO BE CONSIDERED: To take final action in Docket No. 041263-GU.

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

For additional information, please contact: Katherine Fleming, Office of the General Counsel, (850)413-6218.

EXECUTIVE OFFICE OF THE GOVERNOR

NOTICE OF CANCELLATION – The **Governor's Ex-offender Task Force** announces the first meeting to which all interested persons are invited to participate.

DATE AND TIME: Thursday, April 28, 2005, 8:30 a.m. – 5:00 p.m.

PLACE: Cabinet Room, The Capitol, Tallahassee, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: Presentations will include, but not be limited to, goals of the Task Force, introductions of members, reports from the

Department of Corrections and the Department of Juvenile Justice, an overview of national reentry and the proposed federal Second Chance Act.

The **Governor's Faith-Based and Community Advisory Board** announces the following meeting of the board to which all persons are invited to attend.

MEETING TYPE: Education and Training Subcommittee

DATE AND TIME: Wednesday May 4, 2005, 3:00 p.m.

PLACE: Via conference call at 401 South Monroe Street, Tallahassee, Florida 32301, Conference Call-in Number: (850)410-0960

For a copy of the agenda and more information about how to attend the meeting contact: Mark Nelson, (850)413-0909, e-mail: mark@volunteerflorida.org.

Persons with disabilities who require assistance to participate in the meeting are requested to notify the commission office at the same address or telephone number above at least seven days in advance so that their needs can be accommodated.

REGIONAL PLANNING COUNCILS

The **Northeast Florida Regional Council**, Personnel, Budget and Finance Policy Committee announces the following public meeting to which all persons are invited:

DATE AND TIME: Thursday, May 5, 2005, 9:00 a.m.

PLACE: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216

GENERAL SUBJECT MATTER TO BE CONSIDERED: To discuss pending personnel, budget, and finance policy matters. A copy of the agenda may be obtained by contacting: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216.

Notice is also given that two or more members of the Boards of County Commissioners, City/Town Councils/Commissions and other entities covered under Chapter 286, F.S., may attend and speak at the meeting.

The **Northeast Florida Regional Council**, Planning and Growth Management Policy Committee announces the following public meeting to which all persons are invited:

DATE AND TIME: Thursday, May 5, 2005, 9:00 a.m.

PLACE: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216

GENERAL SUBJECT MATTER TO BE CONSIDERED: To discuss pending planning and growth management issues.

A copy of the agenda may be obtained by contacting: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216.

Notice is also given that two or more members of the Boards of County Commissioners, City/Town Councils/Commissions and other entities covered under Chapter 286, F.S., may attend and speak at the meeting.

The **Northeast Florida Regional Council** announces the following public meeting to which all persons are invited:

DATE AND TIME: Thursday, May 5, 2005, 10:00 a.m.

PLACE: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216

GENERAL SUBJECT MATTER TO BE CONSIDERED: Monthly Meeting.

A copy of the agenda may be obtained by contacting: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216.

If a person decides to appeal any decision made by the Council with respect to any matter considered at this meeting, he/she will have to ensure that a verbatim record of the proceedings is made, which includes the testimony and evidence upon which the appeal is to be based.

Individuals needing materials in alternate format, sign language interpreter, or other meeting information, call Peggy Conrad, (904)279-0880, Extension 145, at least three working days prior to the meeting. Hearing-impaired callers use Florida Relay Service, 1(800)955-8771.

Notice is also given that two or more members of the Boards of County Commissioners, City/Town Councils/Commissions and other entities covered under Chapter 286, F.S., may attend and speak at the meeting.

The **Northeast Florida Regional Council**, Ad Hoc Committee on Beach Access announces the following public meeting to which all persons are invited:

DATE AND TIME: Thursday, May 5, 2005, 11:30 a.m.

PLACE: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Committee is established to examine how the Council can address the issue of Beach Access.

A copy of the agenda may be obtained by contacting: Northeast Florida Regional Council, 6850 Belfort Oaks Place, Jacksonville, FL 32216.

Notice is also given that two or more members of the Boards of County Commissioners, City/Town Councils/Commissions and other entities covered under Chapter 286, F.S., may attend and speak at the meeting.

The **Region V, Training Council** will hold its Bi-Annual Advisory Meeting to which all interested persons are invited to participate.

DATE AND TIME: May 25, 2005, 1:30 p.m.

PLACE: St. John's River Community College, Criminal Justice Building, 2990 College Dr., St. Augustine, FL 32084

For an advanced copy of the agenda, please contact: Director Mark Stevens, N.E.F.C.J.T.E.C., (904)713-4900, Fax (904)713-4828

WATER MANAGEMENT DISTRICTS

The **St. Johns River Water Management District** announces the following public meetings and hearings to which all persons are invited.

FINANCE AND ADMINISTRATION COMMITTEE

DATE AND TIME: Tuesday, May 10, 2005, 8:45 a.m.

PLACE: District Headquarters, 4049 Reid St. (Hwy. 100, W.), Palatka, Florida 32177

GENERAL SUBJECT MATTER TO BE CONSIDERED: Discussion of Finance and Administration Committee agenda items followed by committee recommendations to be approved by the full Governing Board. Staff will recommend approval of external budget amendments which affect the adopted budget.

REGULATORY COMMITTEE

DATE AND TIME: Tuesday, May 10, 2005, 10:00 a.m.

PLACE: District Headquarters, 4049 Reid St. (Hwy. 100, W.), Palatka, Florida 32177

GENERAL SUBJECT MATTER TO BE CONSIDERED: Discussion and consideration of Regulatory agenda items followed by committee recommendations to be approved by the full Governing Board.

GOVERNING BOARD MEETING INCLUDING PUBLIC HEARING ON LAND ACQUISITION

DATES AND TIMES: Tuesday, May 10, 2005, 1:00 p.m.; continuing Wednesday, May 11, 2005, 8:00 a.m. if not completed May 10, 2005

PLACE: District Headquarters, 4049 Reid St. (Hwy. 100, W.), Palatka, Florida 32177

GENERAL SUBJECT MATTER TO BE CONSIDERED: Discussion and consideration of District business including regulatory and non-regulatory matters.

A copy of the agenda may be obtained at the St. Johns River Water Management District website www.sjrwmd.com or by calling (386)329-4500.

One or more Governing Board members may attend and participate in the meetings and hearings by means of communications media technology.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in these meetings and hearings is requested to advise the District at least 48 hours in advance.

If any person decides to appeal any decision with respect to any matter considered at the above-listed meetings or hearings, such person will need to ensure that a verbatim record of the proceedings is made to include the testimony and evidence upon which the appeal is to be based.

The **Southwest Florida Water Management District** (SWFWMD) announces the following public meeting to which all interested persons are invited.

THE HERNANDO COUNTY WEEKI WACHEE RIVER AND SPRINGS TASK FORCE MEETING

DATE AND TIME: Monday, May 2, 2005, 3:00 p.m.

PLACE: SWFWMD Headquarters, 2379 Broad Street, Brooksville, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: Discussion of Task Force business.

These are public meetings and agendas are available by contacting: Southwest Florida Water Management District, 2379 Broad Street, Brooksville, FL 34604, 1(800)423-1476, Extension 4400.

The District does not discriminate based on disability. Anyone requiring reasonable accommodation under the ADA should contact 1(800)423-1476 (Florida), or (352)796-7211, Extension 4226, Fax (352)797-5806, TDD ONLY 1(800)231-6103 (Florida).

The **Southwest Florida Water Management District** announces a public meeting, hearing or workshop to which all persons are invited.

AGRICULTURAL ADVISORY COMMITTEE

DATE AND TIME: Tuesday, May 3, 2005, 4:00 p.m.

PLACE: Bartow Service Office, 170 Century Boulevard, Bartow, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: Conduct Committee Business.

Some members of the District's Governing and Basin Boards may attend the meetings.

A copy of the agenda may be obtained by writing: Southwest Florida Water Management District, 2379 Broad Street (U.S. 41, South), Brooksville, Florida 34604, (352)796-7211 or 1(800)231-6103, Suncom 628-4150, TDD ONLY 1(800)231-6103.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/hearing/meeting is asked to advised the agency at least 48 hours before the workshop/hearing/meeting by contacting: Dianna Brass, (352)796-7211, Extension 4604, 1(800)423-1476, Extension 4604, Suncom 628-4150. If you are hearing or speech impaired, please contact the District by calling TDD ONLY 1(800)231-6103.

Any person deciding to appeal any decision made by the Board with respect to any matter considered at this hearing or meeting will need a record of the proceeding, and for such purpose that person may need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is based.

The **Southwest Florida Water Management District** announces a public meeting, hearing or workshop to which all persons are invited.

GREEN INDUSTRY ADVISORY COMMITTEE

DATE AND TIME: Thursday, May 5, 2005, 9:30 a.m.

PLACE: Bartow Service Office, 170 Century Boulevard, Bartow, Florida

GENERAL SUBJECT MATTER TO BE CONSIDERED: Conduct Committee Business.

Some members of the District's Governing and Basin Boards may attend the meetings.

A copy of the agenda may be obtained by writing: Southwest Florida Water Management District, 2379 Broad Street (U.S. 41, South), Brooksville, Florida 34604, (352)796-7211, 1(800)231-6103, Suncom 628-4150, TDD ONLY 1(800)231-6103.

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/hearing/meeting is asked to advised the agency at least 48 hours before the workshop/hearing/meeting by contacting: Dianna Brass, (352)796-7211, Extension 4604, 1(800)423-1476, Extension 4604, Suncom 628-4150. If you are hearing or speech impaired, please contact the District by calling TDD ONLY 1(800)231-6103.

Any person deciding to appeal any decision made by the Board with respect to any matter considered at this hearing or meeting will need a record of the proceeding, and for such purpose that person may need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is based.

REGIONAL UTILITY AUTHORITIES

The **Peace River/Manasota Regional Water Supply Authority** announces the following meeting to which the public is invited.

DATE AND TIME: Wednesday, May 4, 2005, 10:00 a.m.

PLACE: DeSoto County Administrative Building, 201 East Oak Street, Arcadia, FL

GENERAL SUBJECT MATTER TO BE CONSIDERED: Conduct regular business of the Authority.

A copy of the agenda may be obtained by writing: Peace River/Manasota Regional Water Supply Authority, 1645 Barber Road, Suite A, Sarasota, Florida 34240.

Although Authority board meetings are normally recorded, affected persons are advised it may be necessary for them to ensure a verbatim record of the meeting is made, including testimony and evidence upon which an appeal is to be based. Persons with disabilities who need assistance may call (941)316-1776, at least two business days in advance to make appropriate arrangements.

The **Peace River/Manasota Regional Water Supply Authority** announces the following function to which all interested parties are invited.

DATE AND TIME: Friday, May 6, 2005, 11:30 a.m.

PLACE: Peace River Facility, 8998 S. W. County Road 769, Arcadia, FL

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Authority will host an open house and BBQ luncheon at the Peace River Facility located at 8998 S. W. County Road 769, Arcadia, Florida. Authority Board members, local government elected officials and members of the Southwest Florida Water Management District's Governing Board and Basin Boards may be in attendance.

Persons with disabilities who may need assistance may call (941)316-1776, at least two business days in advance to make appropriate arrangements.

AGENCY FOR HEALTH CARE ADMINISTRATION

The **Agency for Health Care Administration** announces a public meeting to which all persons are invited.

DATE AND TIME: Friday, May 13, 2005, 10:00 a.m. – 3:00 p.m.

PLACE: University of South Florida, Tampa, FL

GENERAL SUBJECT MATTER TO BE CONSIDERED: Certificate of Need Interventional Cardiology Advisory Group Meeting.

A copy of the agenda and exact USF campus location may be obtained by writing: Agency for Health Care Administration, 2727 Mahan Drive, MS #28A, Tallahassee, Florida 32308, e-mail: COLVINL@ahca.myflorida.com. To be included in e-mail notices of the interventional cardiology advisory group, please mail/e-mail or fax your e-mail address to the address above or fax to (850)413-7955.

In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate in this proceeding should contact the agency sending the notice not later than five working days prior to the proceeding at the address given on the notice. Telephone: (850)922-0791.

The **Agency for Health Care Administration** announces a conference call of the Comprehensive Health Information System Advisory Council Subgroup on Satisfaction Surveys of the Health Plan Consumer Reports Technical Workgroup, to which all interested parties are invited.

DATE AND TIME: Friday, April 29, 2005, 9:00 a.m.

PLACE: Agency for Health Care Administration, Tallahassee, FL, Meet Me Number (850)414-1706, Suncom 994-1706

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct a conference call meeting of the Subgroup on Satisfaction Surveys of the Health Plan Consumer Reports Technical Workgroup to discuss the content of member satisfaction survey data to be published in 2005.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact William Dahlem, (850)410-0224, at least five calendar days prior to the meeting.

A copy of the agenda may be obtained by writing: William Dahlem, Agency for Health Care Administration, 2727 Mahan Drive, Bldg. 3, Mail Stop #16, Tallahassee, FL 32308-5403.

DEPARTMENT OF MANAGEMENT SERVICES

The **State Technology Office** announces a meeting of the Standard Operating Procedures and Technical Committee of the Joint Task Force on State Agency Law Enforcement Communications to which all interested persons are invited.

DATE AND TIME: May 3, 2005, 9:00 a.m.

PLACE: Florida Department of Law Enforcement, 2331 Phillips Road, Room A3046, Tallahassee, FL 32308

GENERAL SUBJECT MATTER TO BE CONSIDERED: To discuss operational matters of the Statewide Law Enforcement Radio System.

For more information about the agenda, contact: Victor Cullars, Florida Department of Law Enforcement (Technical Committee), (850)410-8300 or Todd Preston, Fish and Wildlife Conservation Commission (SOP Committee), (850)410-0656.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

The Florida **Board of Architecture and Interior Design** announces the following meeting to be held by telephone conference call, to which all persons are invited to attend.

DATE AND TIME: May 5, 2005, 10:00 a.m. Eastern Time

PLACE: Access Phone: Direct (850)922-2903, Suncom 292-2903, Toll Free 1(800)416-4254

To obtain a copy of the agenda, further information, or submit written or other physical evidence, contact in writing: Board of Architecture and Interior Design, 1940 N. Monroe St., Tallahassee, Florida 32399.

If a person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need a record of the proceedings, and for such purpose he/she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact the Board office, (850)487-8304, at least five calendar days prior to the meeting. If you are hearing or speech impaired, please contact the Board office using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

The Florida **Board of Architecture and Interior Design** announces the following meeting to be held by telephone conference call, to which all persons are invited to attend.

DATE AND TIME: June 28, 2005, 3:00 p.m. Eastern Time
 PLACE: Access Phone: Direct (850)922-2903, Suncom 292-2903, Toll Free 1(800)416-4254

To obtain a copy of the agenda, further information, or submit written or other physical evidence, contact in writing: Board of Architecture and Interior Design, 1940 N. Monroe St. Tallahassee, Florida 32399.

If a person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need a record of the proceedings, and for such purpose he/she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact the Board office, (850)487-8304, at least five calendar days prior to the meeting. If you are hearing or speech impaired, please contact the Board office using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

The Probable Cause Panel of the **Construction Industry Licensing Board** announces a meeting.

DATE AND TIMES: April 26, 2005, 9:00 a.m. and 10:00 a.m. or soon thereafter

PLACE: Dept. of Business and Professional Regulation, 1940 North Monroe Street, Tallahassee, Florida 32309, (850)488-0062

GENERAL SUBJECT MATTER TO BE CONSIDERED: To review complaints in which a determination of the existence of probable cause has already been made.

A copy of the public portion of the agenda may be obtained by writing: Patrick Creehan, Chief Construction Attorney, Department of Business and Professional Regulation, Office of the General Counsel, 1940 N. Monroe Street, Suite 60, Tallahassee, Florida 32399-2202, (850)488-0062.

NOTE: In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate in this proceeding should contact the Construction Prosecution Section no later than seven (7) days prior to the proceeding or meeting at which such special accommodation is required. The Construction Prosecution Section may be contacted at the address and phone number listed above.

The Florida **Electrical Contractor's Licensing Board** announces the following Board Meeting to which all interested persons are invited to attend.

DATE AND TIME: May 18, 2005, 8:00 a.m. or soon thereafter
 GENERAL SUBJECT MATTER TO BE CONSIDERED: Legislative and Rules Discussion and General Business Meeting.

DATE AND TIME: May 18, 2005, 2:00 p.m. or soon thereafter

GENERAL SUBJECT MATTER TO BE CONSIDERED: Probable Cause Panel Meeting (closed to the public).

DATE AND TIME: May 19, 2005, 8:00 a.m. or soon thereafter
 GENERAL SUBJECT MATTER TO BE CONSIDERED: Disciplinary Actions, General Board and Business Meeting.

DATE AND TIME: March 20, 2005, 8:00 a.m. or soon thereafter

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Board and Business Meeting.

PLACE: The Edgewater Beach Hotel and Club, 1901 Gulf Shore Blvd., North, Naples, FL 34102, (239)403-2000.

To obtain a copy of the agenda, further information, or submit written or other physical evidence, contact, in writing: Electrical Contractors' Licensing Board Office, 1940 North Monroe Street, Tallahassee, Florida 32399-0771.

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting he or she will need to ensure that a verbatim record of the proceedings is made, which will include the testimony and evidence upon which the appeal is to be based.

Any persons requiring special accommodations at this meeting because of a disability or physical impairment should contact the Board Office, (850)921-4847, at least five (5) calendar days prior to the meeting. If you are hearing or speech impaired, please contact the Board Office using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-9771 (TDD).

The Florida **Board of Funeral Directors and Embalmers** announces the following meetings to which all parties are invited to attend.

DATE AND TIME: May 10, 2005, 1:00 p.m.
 PLACE: Embassy Suites Hotel, Orlando-North, 225 East Altamonte Drive, Altamonte Springs, FL 32701, (407)834-2400

GENERAL SUBJECT MATTER TO BE CONSIDERED: Finance Committee meeting, Rules Committee meeting and Probable Cause Panel meeting, portions which are closed to the public.

DATE AND TIME: May 11, 2005, 8:30 a.m.

PLACE: Embassy Suites Hotel, Orlando-North, 225 East Altamonte Drive, Altamonte Springs, FL 32701, (407)834-2400

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Board and Business meeting.

To obtain a copy of the agenda, further information, or submit written or other physical evidence, contact in writing: Board of Funeral Directors and Embalmers, 1940 N. Monroe St., Tallahassee, Florida 32399.

If a person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need a record of the proceedings, and for such purpose he/she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact the Board office, (850)487-1395, at least five calendar days prior to the meeting. If you are hearing or speech impaired, please contact the Board office using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

The Florida **Building Code Administrators** and Inspectors Board announces a telephone conference call to which all persons are invited to participate.

DATE AND TIME: May 3, 2005, 10:00 a.m.

PLACE: Department of Business and Professional Regulation, 1940 N. Monroe Street, Tallahassee, FL, Conference Number (850)487-8540, Suncom 277-8540

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Board and Business Meeting.

Any person deciding to appeal a decision made with respect to any matter considered at this meeting will need to ensure that a verbatim record of the proceeding is made. Such record must include testimony and evidence upon which the appeal is to be based.

Any person requiring special accommodations at this meeting because of a disability or physical impairment should contact Department of Business and Professional Regulation, Building Code Administrators and Inspectors Board, (850)922-6096, at least forty-eight (48) hours prior to the meeting. If you are hearing or speech impaired, please contact the board office using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

The Florida **Real Estate Appraisal Board**, Probable Cause Panel announces a telephone conference call to be held via meet me number.

DATE AND TIME: Monday, May 2, 2005, 9:30 a.m. or the soonest thereafter (portions of the probable cause proceedings are not open to the public)

PLACE: Zora Neale Hurston Building, North Tower, Ninth Floor, Suite 901N, 400 West Robinson Street, Orlando, Florida 32801 or Meet Me Number (850)488-5778.

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct a private meeting to review cases to determine probable cause and to conduct a public meeting to review cases on which probable cause has been found.

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is to be made.

NOTE: In accordance with the Americans with Disabilities Act, any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact the Division of Real Estate, (407)481-5662 (between the hours of 9:00 a.m. – 4:00 p.m.), at least five (5) calendar days prior to the meeting. If you are hearing or speech impaired, please call the Real Estate Division using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

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

The **Department of Health** hereby gives notice of a public hearing regarding Rule 64B-1.016, F.A.C., Fees: Examination and Post-Examination Review to which all interested persons are invited to participate.

DATE AND TIME: Wednesday May 4, 2005, 9:30 a.m.

PLACE: 2585 Merchant's Row Blvd., Room 110T, Tallahassee, Florida 32399

GENERAL SUBJECT MATTER TO BE CONSIDERED: This hearing will be held to allow discussion and input from all those affected on lowering the exam fee for dental clinical exams from \$1,200.00 to \$320.00.

The rule was originally published in Vol. 31, No. 3, of the January 21, 2005, Florida Administrative Weekly.

Interested persons may obtain an agenda for this meeting by mailing or faxing a request to: Hillary Ring, Department of Health, 4052 Bald Cypress Way, Bin #A02, Tallahassee, Florida 32399-17033, Fax (850)410-1448.

Any person requiring a special accommodation at this hearing because of a disability or physical impairment should contact the Department, (850)245-4005, at least five calendar days prior to the hearing. If you are hearing or speech impaired, please contact the Department using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

Section 286.0105, F.S., provides that, if a person decides to appeal any decision made by the department with respect to any matter considered at this hearing, they will need a record of proceedings, and for such purposes, they may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is based.

The **Department of Health, Board of Hearing Aid Specialists** announces an official Board meeting. All interested parties are invited to attend at the address listed below, which is normally open to the public.

DATE AND TIME: May 20, 2005, 9:00 a.m.

PLACE: DoubleTree Galleria, 2670 E. Sunrise Blvd., Fort Lauderdale, FL 33304, (954)565-3800

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Board Business.

A copy of the agenda may be obtained by writing: Sue Foster, Executive Director, Department of Health, Board of Hearing Aid Specialists, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258.

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is to be made.

Those who are hearing impaired, using TDD equipment, can call the Florida Telephone Relay System, 1(800)955-8771. Persons requiring special accommodations due to disability or physical impairment should contact Sue Foster at least one week prior to meeting date.

The Florida **Board of Medicine**, Surgical Care Committee announces a meeting to which all persons are invited.

DATE AND TIME: Friday, April 29, 2005, 6:00 p.m.

PLACE: Renaissance Ft. Lauderdale Hotel, 1617 S. E. 17th Street, Ft. Lauderdale, FL 33316

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct general business of the committee.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact the Florida Board of Medicine, (850)245-4131, at least five (5) calendar days prior to the meeting. If you are hearing or speech impaired, please call the Florida Board of Medicine using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

A copy of the agenda may be obtained by writing: Larry McPherson, Board Director, Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253.

Please note that if a person decides to appeal any decision made by the Board with respect to any matter considered at the above cited meeting or hearing, he will need a record of the proceedings, and for such purpose, may need to insure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is to be based. A verbatim tape record of the proceeding may be obtained from a court reporter, if present, or an audio record from the Board Director.

The **Department of Health, Division of Medical Quality Assurance, Board of Medicine**, Probationers' Committee announces a public meeting to which all persons are invited.

DATE AND TIME: Friday, May 6, 2005, 9:00 a.m.

PLACE: Tampa Airport Marriott, Tampa International Airport, Tampa, FL 33607, (813)879-5151

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct general business of the Committee.

A copy of the agenda may be obtained by writing: Tracie Natale, Medical Compliance Officer, Department of Health, Division of Medical Quality Assurance, Client Services Unit, 4052 Bald Cypress Way, Bin #C01, Tallahassee, FL 32399-3251.

Please note that if a person decides to appeal any decision made by the Board with respect to any matter considered at the above cited meeting, he/she will need a record of the proceeding, and for such purpose, he/she may need to insure that a verbatim proceeding is made, which record includes the testimony and evidence upon which the appeal is to be based.

NOTE: In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate in this proceeding should contact: Tracie Natale, (850)245-4444, Ext. 3546, no later than seven (7) days prior to the meeting at which such special accommodation is required. Hearing or speech-impaired persons may contact the Compliance Officer at the address noted above; or, via the Florida Dual Party Relay System, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

The Florida **Board of Medicine**, Credentials Committee, announces a meeting to which all persons are invited.

DATE AND TIME: Saturday, May 21, 2005, 8:00 a.m. or soon thereafter

PLACE: Marriott Fort Lauderdale North, 6650 N. Andrews Ave., Ft. Lauderdale, FL, (954)771-0440

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct general business of the Committee.

A copy of the agenda may be obtained by writing: Larry McPherson, Board Director, Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253.

Please note that if a person decides to appeal any decision made by the committee with respect to any matter considered at the above cited meeting or hearing, he will need a record of the proceedings, and for such purpose, he may need to insure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is to be based.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact the Florida Board of Medicine, (850)245-4131, at least five (5) calendar days prior to the meeting. If you are hearing or speech impaired, please call the Florida Board of Medicine using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

The **Council on Physician Assistants** announces a meeting to which all persons are invited.

DATE AND TIME: Friday, May 13, 2005, 9:00 a.m. or soon thereafter

PLACE: Hyatt Regency Orlando, 9300 Airport Boulevard, Orlando, Florida 32827, (407)825-1234

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct Council business.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact the Council on Physician Assistants, (850)245-4131, at least five (5) calendar days prior to the meeting. If you are hearing or speech impaired, please call the Council on Physician Assistants the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

A copy of the agenda may be obtained by writing: JoAnne Davis-Trexler, Supervisor/Consultant, Council on Physician Assistants, Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253.

If any person decides to appeal any decision made by the Council with respect to any matter considered at this meeting, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence upon which the appeal is to be made.

The **Department of Health, Board of Opticianry** announces an official Board meeting. All interested parties are invited to attend at the address listed below, which is normally open to the public.

DATE AND TIME: May 9, 2005, 9:00 a.m.

PLACE: Homewood Suites, 2987 Apalachee Parkway, Tallahassee, FL 32301, (850)402-9400

GENERAL SUBJECT MATTER TO BE CONSIDERED: Official Board Meeting.

A copy of the agenda may be obtained by writing: Sue Foster, Executive Director, Department of Health, Board of Opticianry, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258.

If a person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she may need to ensure that a verbatim record of the proceeding is made, which records include the testimony and evidence upon which the appeal is to be made.

Those who are hearing impaired, using TDD equipment can call the Florida Telephone Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD). Persons requiring special accommodations due to disability or physical impairment should contact Sue Foster, (850)245-4474, at least one week prior to the meeting date.

The Probable Cause Panel of the **Board of Osteopathic Medicine** announces a meeting:

DATE AND TIME: Thursday, May 19, 2005, 10:00 a.m. or soon thereafter

PLACE: The Hyatt Regency, 225 Coastline Drive, East, Jacksonville, FL 32202, (904)633-9095

GENERAL SUBJECT MATTER TO BE CONSIDERED: To review those cases on which a determination of existence of probable cause has already been made.

A copy of the public portion of the agenda may be obtained by writing: Kathryn Price, Senior Attorney, Department of Health, Prosecution Services, 4052 Bald Cypress Way, Bin #C65, Tallahassee, FL 32399.

NOTE: In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate in this proceeding should contact the Practitioner Regulation Section no later than seven (7) days prior to the proceeding or meeting at which such special accommodation is required. The Practitioner Regulation Section may be contacted: 4052 Bald Cypress Way, Bin #C65, Tallahassee, FL 32399, 1(800)955-8771 (TDD) or 1(800)955-8770 via Florida Relay Service.

The Florida **Board of Osteopathic Medicine** will hold the following meeting to which all persons are invited:

DATES AND TIMES: Thursday, May 19, 2005, 5:00 p.m. or shortly thereafter; Friday, May 20, 2005, 9:00 a.m. or shortly thereafter; Saturday, May 21, 2005, 9:00 a.m. or shortly thereafter

PLACE: The Hyatt Regency, 225 Coastline Drive, East, Jacksonville, FL 32202, (904)633-9095

GENERAL SUBJECT MATTER TO BE CONSIDERED: Regular Board business.

If a person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he may need to ensure that a verbatim record of the proceedings is made, which records includes the testimony and evidence upon which the appeal is to be based.

A copy of any item on the agenda may be obtained by writing: Pamela King, Executive Director, Board of Osteopathic Medicine, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256, (850)488-0595. You will be charged seventeen cents per page for the number of copies desired.

Any person requiring a special accommodation at this meeting because of a disability or physical impairment should contact Christy Robinson, (850)488-0595, at least five calendar days prior to the meeting. Persons who are hearing or speech impaired, can contact Christy Robinson using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

The **Board of Speech-Language Pathology and Audiology** announces a meeting to which all interested persons are invited to attend.

DATE AND TIME: Wednesday, May 25, 2005, 9:00 a.m. or soon thereafter

PLACE: Marco Island Marriott, 400 South Collier Boulevard, Marco Island, Florida 34145, (239)394-2511

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct general business of the Board.

Any person requiring special accommodations at this meeting due to disability or physical impairment should contact the Board of Speech-Language Pathology and Audiology, (850)245-4161, at least five (5) calendar days prior to the meeting. If you are hearing or speech impaired, please contact the Board office using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) and 1(800)955-8771 (TDD).

A copy of the agenda may be obtained by writing: Board of Speech-Language Pathology and Audiology, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256.

Please note, that if a person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he will need a record of the proceedings, and for such purpose he may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

The **Department of Health** announces that the meeting of the Technical Review and Advisory Panel for Onsite Sewage Treatment and Disposal Systems scheduled for May 26, 2005 in Polk City has been rescheduled. The Department of Health announces the following public meeting to which all persons are invited.

DATE AND TIME: May 25, 2005, 9:00 a.m.

PLACE: Florida Onsite Wastewater Association Training Center, 2301 State Road 557, North, Polk City, FL 32868, (863)956-5540

GENERAL SUBJECT MATTER TO BE CONSIDERED: Identify and discuss issues relating to onsite sewage treatment and disposal systems which may require changes to Chapter 64E-6, F.A.C.

A copy of the agenda may be obtained by contacting: Shirley Kugler, Department of Health, Bureau of Onsite Sewage Programs, 4052 Bald Cypress Way, Bin #A08, Tallahassee, Florida 32399-1713.

Any person requiring a special accommodation at this meeting because of disability or physical impairment should contact Shirley Kugler, (850)245-4070, at least two weeks prior to the meeting.

The Florida Alliance for Diabetes Prevention and Care (formerly IWG), **Department of Health**, Diabetes Prevention and Control Program will hold their next Alliance Group meeting, to which all interested persons are invited to participate.

DATE AND TIME: Tuesday May 10, 2005, 12:30 p.m. – 4:30 p.m.

PLACE: Tampa Airport Marriott Hotel, Tampa International Airport, Tampa, FL 33607, (813)879-5151

If you would like to attend, have questions or require additional information, please contact: M. R. Street, (850)245-4330. All requests for special accommodations must be received by Friday, May 6, 2005, 5:00 p.m. Eastern Time.

The **Florida Diabetes Advisory Council** (DAC) members announce their quarterly meeting to which all interested persons are invited to participate.

DATE AND TIME: Wednesday, May 11, 2005, 9:00 a.m. – 3:00 p.m.

PLACE: Tampa Airport Marriott Hotel, Tampa International Airport, Tampa, FL 33607, (813)879-5151

This is a public meeting. If you would like to attend, have questions or require additional information, please contact M.R. Street, (850)245-4330. All requests for special accommodations must be received by Friday, May 6, 2005, 5:00 p.m. Eastern Time.

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

The **Department of Children and Family Services**, District 12, Community Alliance announces the following special called public meeting to which all persons are invited.

DATE AND TIME: April 22, 2005, 2:00 p.m.

PLACE: Daytona Beach Regional Service Center, 210 N. Palmetto Ave., Conf. Rm 148, Daytona Beach, Florida

A copy of the agenda may be obtained by writing: Department of Children and Family Services, 210 N. Palmetto Avenue, Daytona Beach, FL 32114-3284, Attn: Denise Kelly.

If you need special accommodations (i.e. assisted listening devices, sign language interpreter, etc.) please notify Denise Kelly, (904)238-4648, at least 48 hours in advance of the meeting. If you are hearing or speech impaired, please use Florida Relay Service for TDD or TTY, 1(800)955-8771.

The **Department of Children and Family Services**, District 12, Community Alliance announces the following public meeting to which all persons are invited.

DATE AND TIME: May 4, 2005, 1:30 p.m. (This meeting takes the place of the regularly scheduled meeting on May 11, 2005.)

PLACE: Daytona Beach Regional Service Center, 210 N. Palmetto Ave., Conf. Rm. 148, Daytona Beach, Florida

A copy of the agenda may be obtained by writing: Department of Children and Family Services, 210 N. Palmetto Avenue, Daytona Beach, FL 32114-3284, Attn: Denise Kelly. If you need special accommodations (i.e. assisted listening devices, sign language interpreter, etc.) please notify Denise Kelly, (904)238-4648, at least 48 hours in advance of the meeting.

If you are hearing or speech impaired, please use Florida Relay Service for TDD or TTY at 1(800)955-8771.

DEPARTMENT OF FINANCIAL SERVICES

The **Department of Financial Services, Division of Treasury**, Deferred Compensation Advisory Council announces the following meeting to which all persons are invited:

DATE AND TIME: Friday, May 20, 2005, 9:00 a.m.

PLACE: The Hermitage Centre, Conference Room 415, 1801 Hermitage Blvd., Tallahassee, FL

For more information about the meeting or a copy of the agenda, please contact: Kandi Winters, Chief of Deferred Compensation, Division of Treasury, 200 E. Gaines St., Tallahassee, FL 32399-0346, (850)413-3162

FLORIDA AEROSPACE FINANCE CORPORATION

The **Florida Aerospace Finance Corporation (FAFC)** announces a Board of Director's Nominating Committee meeting and teleconference to which the public is invited.

DATE AND TIME: April 26, 2005, 10:00 a.m. – 11:00 a.m.

PLACE: Office of Florida Aerospace Finance Corporation; To attend via telephone the number to call is: 1(866)249-5325, participant code 393255

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Nominating Committee of the FAFC Board will meet to propose a slate of Board Officers for the Corporation's next fiscal year.

For more information, contact: Ms. Judy Blanchard, (321)690-3397.

To obtain a copy of the agenda write: The Florida Aerospace Finance Corporation, 403 Brevard Avenue, Suite 1, Cocoa, Florida 32922.

Any person requiring special accommodations at this meeting because of disability or physical impairment should contact the Florida Aerospace Finance Corporation.

Please note that if a person decides to appeal any decision made by the Board with respect to any matter considered at the above cited meeting, they will need a record of the proceedings, and for such purpose, they may need to ensure that a verbatim record of the proceeding, which record includes the testimony and evidence upon which the appeal is to be based.

FLORIDA MEDICAL MALPRACTICE JOINT UNDERWRITING ASSOCIATION

The **Florida Medical Malpractice Joint Underwriting Association** announces a Claims and Underwriting Committee meeting to which all persons are invited.

DATE AND TIME: Tuesday, April 26, 2005, 4:00 p.m.

PLACE: Killlearn Inn, Tallahassee, FL

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Committee will receive and consider reports from the Association's General Counsel, General Manager, Servicing Carrier, and such other business properly brought before the Committee.

A copy of the agenda may be obtained two weeks prior to the meeting by writing: FMMJUA, 1836 Hermitage Blvd., Suite 201, Tallahassee, FL 32308

The **Florida Medical Malpractice Joint Underwriting Association** announces a Board of Governors meeting to which all persons are invited.

DATE AND TIME: Wednesday, April 27, 2005, 9:00 a.m.

PLACE: Killlearn Inn, Tallahassee, FL

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Board will receive and consider quarterly reports from the Association's Investment Counsel, General Counsel, Servicing Carrier, Claims Committee, General Manager, and such other business properly brought before the Board.

A copy of the agenda may be obtained two weeks prior to the meeting by writing: FMMJUA, 1836 Hermitage Blvd., Suite 201, Tallahassee, FL 32308.

VISIT FLORIDA

VISIT FLORIDA announces a public meeting of the Signage Task Force of the New Product Development Council.

DATE AND TIME: Wednesday, April 27, 2005, 10:00 a.m. – adjournment

PLACE: VISIT FLORIDA Corporate Offices, 661 East Jefferson Street, Suite 300 Tallahassee, FL 32301, (850)488-5607

GENERAL SUBJECT MATTER TO BE CONSIDERED: To discuss ongoing business of the task force.

For further information contact: Sherri Martin, VISIT FLORIDA, P. O. Box 1100, Tallahassee, Florida 32302-1100, (850)488-5607, Ext. 366.

Any person requiring special accommodations at this meeting because of a disability should contact VISIT FLORIDA at least five business days prior to the meeting. Persons who are hearing or speech impaired can contact VISIT FLORIDA by using the Florida Relay Service, 1(800)955-8770 (Voice) or 1(800)955-8771 (TDD).

PRIDE ENTERPRISES

PRIDE Enterprises announced a BOD meeting to which all interested persons are invited.

DATE AND TIME: Wednesday, May 4, 2005, 9:00 a.m. – 2:00 p.m.

PLACE: Florida Hotel and Motel Association Building, 200 W. College Ave., Tallahassee, FL, website: www.peol.com

COMMISSION ON MARRIAGE AND FAMILY SUPPORT INITIATIVES

The **Commission on Marriage and Family Support Initiatives** announces the following meeting of the commission to which all persons are invited to attend.

MEETING TYPE: Program Committee

DATE AND TIME: Wednesday, May 4, 2005, 9:00 a.m. – 11:00 a.m.

PLACE: Via conference call, 111 N. Gadsden Street, Suite 100, Tallahassee, FL 32301-1507

For a copy of the agenda and more information about how to attend the meeting contact: Heidi Rodriguez, (850)488-4952, Ext. 135, e-mail: hrodriguez@ounce.org.

Persons with disabilities who require assistance to participate in the meeting are requested to notify the commission office at the same address or telephone number above at least seven days in advance so that their needs can be accommodated.

The **Commission on Marriage and Family Support Initiatives** announces the following meeting of the commission to which all persons are invited to attend.

MEETING TYPE: Public Awareness Committee

DATE AND TIME: Friday, May 6 2005, 9:00 a.m. – 11:00 a.m.

PLACE: Via conference call, 111 N. Gadsden Street, Suite 100, Tallahassee, FL 32301-1507

For a copy of the agenda and more information about how to attend the meeting contact: Heidi Rodriguez, (850)488-4952, Ext. 135, e-mail: hrodriguez@ounce.org.

Persons with disabilities who require assistance to participate in the meeting are requested to notify the commission office at the same address or telephone number above at least seven days in advance so that their needs can be accommodated.

The **Commission on Marriage and Family Support Initiatives** announces the following meeting of the commission to which all persons are invited to attend.

MEETING TYPE: Policy Committee

DATE AND TIME: Thursday, May 12, 2005, 9:00 a.m. – 11:00 a.m.

PLACE: Via conference call, 111 N. Gadsden Street, Suite 100, Tallahassee, FL 32301-1507

For a copy of the agenda and more information about how to attend the meeting contact: Heidi Rodriguez, (850)488-4952, Ext. 135, e-mail: hrodriguez@ounce.org.

Persons with disabilities who require assistance to participate in the meeting are requested to notify the commission office at the same address or telephone number above at least seven days in advance so that their needs can be accommodated.

Section VII Notices of Petitions and Dispositions Regarding Declaratory Statements

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 MANAGEMENT

NOTICE IS HEREBY GIVEN THAT the Public Employees Relations Commission has issued an order disposing of the petition for declaratory statement filed by James R. Ervin on February 4, 2005, Case No. DS-2005-002. The following is a summary of the Commission's disposition of the petition:

The petition was denied because the questions he posed were not appropriate for resolution in a proceeding seeking a declaratory statement. The petition inappropriately inquired into a current dispute rather than sought guidance for future actions, failed to specify the statutory provisions or rules that were the subject of his request, and sought guidance for persons other than himself.

A copy of the order may be obtained by writing: Clerk, Public Employees Relations Commission, 4050 Esplanade Way, Suite 150, Tallahassee, Florida 32399-0950.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

The Construction Industry Licensing Board hereby gives notice that it has received a Petition for Declaratory Statement filed on March 14, 2004, by Timothy J. Settles, Performance Contracting, Inc. The Petitioner seeks the Board's interpretation of Section 489.105, F.S., with regard to installation of mechanical insulation on piping, plumbing, HVAC ducts, equipment boilers, and other applications where mechanical insulation is used. The Board will consider the Petition at its meeting to be held on May 13, 2005, in Deerfield Beach, Florida.

Copies of the petition may be obtained by writing: Tim Vaccaro, Executive Director, Construction Industry Licensing Board, 1940 N. Monroe Street, Tallahassee, Florida 32399-1039.

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 FINANCIAL SERVICES

NOTICE IS HEREBY GIVEN THAT the Office of Financial Regulation has issued an order that disposes of the petition for declaratory statement that was filed on November 4, 2005, by Torrey C. Webb, as Chief Executive Officer of IDA Management Services, Inc., a State of Washington corporation. The petition sought the agency's opinion as to whether the Securities and Investor Protection Act (Chapter 517, F.S.) applies to the petitioner's proprietary product, the individual deductible service plan.

The Office determined that individual deductible service plans are not securities within the meaning of Chapter 517, Florida Statutes. Furthermore, the Office determined that IDA's marketing and sale of individual deductible service plans constituted the business of banking in violation of Chapter 665, Florida Statutes, and the practice of loan brokering in violation of Chapter 687, F.S.

A copy of the order may be obtained from: Alan Jackson, Assistant General Counsel, Office of Financial Regulation, Office of General Counsel, Fletcher Building, 200 East Gaines Street, Tallahassee, Florida 32399-0379.

NOTICE IS HEREBY GIVEN that the Department of Financial Services, Division of State Fire Marshal, has received a Petition for Declaratory Statement filed February 24, 2005, from the Collier County Fire Code Official's Office, c/o Ricco Longo, Petitioner. The Petition is seeking the Department's interpretation of Chapter 11 of NFPA 72 (2002 edition), Section 633.70(4), F.S., and Chapter 69A-60, F.A.C. Specifically, Petitioner asks, "When an appropriate license holder (such as an EC, EF, EG, EY or EZ) installs one or more smoke or heat detectors, or enables a keypad fire button on a new or existing Household Fire and Burglary Warning System Control Unit, must this be reviewed for compliance with

NFPA 72 requirements and does this fall to the purview of the local Fire Code Official as well as the State Fire Marshal's Office?" Petitioner also includes certain follow up questions. A copy of the Petition may be obtained by writing to, calling or sending a fax to: Gabriel Mazzeo, Attorney, Division of State Fire Marshal, 200 East Gaines Street, Tallahassee, Florida 32399-0340, (850)413-3604, Fax (850)922-1235 (please advise if you would like it mailed or faxed to you and please include your phone number on your request in case any question arises), e-mail: Gabe.Mazzeo@fldfs.com.

Section VIII
Notices of Petitions and Dispositions
Regarding the Validity of Rules

Notice of Petition for Administrative Determination has been filed with the Division of Administrative Hearings on the following rules:

Whitley Bay Marina, LLC vs. Department of Environmental Protection and the Board of Trustees of the Internatl Improvement Trust Fund; Case No.: 05-1173RX; Rule Nos.: 18-21.003(23), 18-21.011

Bonnie Siegel and Gayle Knight vs. Agency for Health Care Administration; Case No.: 05-1239RP; Rule No.: 59G-4.250

Mosaic Fertilizer, LLC and Mosaic Phosphates Company vs. Department of Environmental Protection; Case No.: 05-1177RP; Rule No.: 62-673

Whitley Bay Marina, LLC vs. Department of Environmental Protection and the Board of Trustees of the Internal Improvement Trust Fund; Case No.: 05-1174RU

Frank M. Bafford, Sr. vs. Florida Commission on Human Relations; Case Nos.: 05-1211RU, 05-1219RU

Lawnwood Medical Center, Inc. d/b/a Lawnwood Regional Medical Center vs. Agency for Health Care Administration; Case No.: 05-1232RU

Notice of Disposition of Petition for Administrative Determination have been filed by the Division of Administrative Hearings on the following rules:

NONE

Section IX
Notices of Petitions and Dispositions
Regarding Non-rule Policy Challenges

NONE

Section X
Announcements and Objection Reports of
the Joint Administrative Procedures
Committee

NONE

Section XI
Notices Regarding Bids, Proposals and
Purchasing

DEPARTMENT OF EDUCATION

INVITATION TO BID

The Florida State University Facilities Purchasing shall receive sealed bids until the dates and times shown for the following projects. Bids may be brought to the bid opening or sent to:

Florida State University
 Facilities Maintenance, Purchasing
 114F Mendenhall Building A
 Tallahassee, Florida 32306

prior to bid opening. Bidder must reference bid number, opening date and time on outside of bid package to insure proper acceptance. Bids submitted by facsimile are not acceptable. For information relating to the Invitation(s) to Bid, contact the

Bid Number: FAC65-2005
 Purchasing Agent: B. J. Lewis, Facilities
 Mandatory Pre-Bid: May 4, 2005, 10:00 a.m.
 Location: West entrance/elevator lobby of University Ctr. Bldg. C, located on 390 Champions Way, Tallahassee, FL
 Public Bid Opening: May 12, 2005, 2:00 p.m.
 FSU-Facilities Maintenance
 116 Mendenhall Hall, Building A
 Tallahassee, Florida 32306-4150
 Facilities Maintenance Purchasing

Bid Documents: Florida State University is seeking complete bids for relocation services. Move shall take place August 17th or 18th, 2005, and involves moving approximately 70 rooms of office furniture and equipment, from FSU University Center Building C, on the Main Campus, to FSU Research Foundation Building B, located in Innovation Park, adjacent to FSU's Southwest Campus. Bid packages can be obtained Facilities, Purchasing Agent, Mrs. B. J. Lewis. Bids will be accepted till 2:00 p.m. on May 12, 2005, at Florida State University, Facilities Purchasing, 114 Mendenhall Maintenance Building, Tallahassee, FL 32306-4150.

INVITATION TO BID

The Florida State University Facilities Purchasing shall receive sealed bids until the dates and times shown for the following projects. Bids may be brought to the bid opening or sent to:

Florida State University
 Facilities Maintenance, Purchasing
 114F Mendenhall Building A
 Tallahassee, Florida 32306

prior to bid opening. Bidder must reference bid number, opening date and time on outside of bid package to insure proper acceptance. Bids submitted by facsimile are not acceptable. For information relating to the Invitation(s) to Bid, contact the

Bid Number: FAC66-2005
Purchasing Agent: B.J. Lewis, Facilities
Public Bid Opening: May 9, 2005, 10:00 a.m.
 FSU-Facilities Maintenance
 116 Mendenhall Hall, Building A
 Tallahassee, Florida 32306-4150
 Facilities Maintenance Purchasing

Bid Documents: Project Scope of Work

1. Suspect asbestos sample collection and analysis to include bulk samples, PCM & TEM air samples, wipe samples, and micro vacuum dust samples.
2. Asbestos surveys to include design, DLES, or NESHAPS as required.
3. Prepare asbestos removal design specifications and drawings under common practice known as "Means and Methods".
4. Review contractor pre-work, during work, and post-work submittals.

5. Project oversight to include regulatory compliance on part of contractor. Oversight on projects shall be required on projects designated by OSHA as Class I, Class II and Class III asbestos removal. For project oversight, the price of all PCM air sampling shall be included with the hourly rates. Samples of air should be taken to demonstrate the integrity of the enclosure, the cleanliness of the clean room and shower area, and the effectiveness of the HEPA filter.
6. Daily visual inspections of work area and area adjacent to work area for regulatory compliance.
7. Final visual inspection of work area following ASTM designation E 1368-97, "standard Practice for Visual Inspection of Asbestos Abatement Projects".
8. Collection and analysis of background, ambient, personnel and clearance air samples.
9. Project close out report and documents. Post Project reports to be submitted in duplicate on CD-ROM media in a format determined by the University representatives and consultant upon award of the contract.
10. Oversight and air sampling of FSU's Operations and Maintenance activities.
11. Maintain Asbestos Surveys, abatement project and any other support materials to stored and safeguarded for a period of five years above that required by state and federal requirements.
12. Other environmental services as determined by Florida State University.

CALL FOR BIDS

PROJECT: Lee Street Roadway Project
 No.: BR-639

FOR: Florida Atlantic University

QUALIFICATION: All Bidders must be qualified at the time of bid opening in accordance with the Instructions to Bidders, Article B-2.

Sealed bids will be received on,

DATE AND TIME: May 26, 2005, until 3:00 p.m. local time

PLACE: Florida Atlantic University, Purchasing Department, 777 Glades Road, Boca Raton, Florida 33431

At which time and place they will be publicly opened and read aloud

PROPOSAL: Bids must be submitted in full and in accordance with the requirements of the drawings and Project manual, which may be obtained or examined at the office of the:

ARCHITECT/ENGINEER: Miller Legg (561)689-1138

DATE AND TIME: April 26, 2005, 9:00 a.m.

PLACE: 2005 Vista Pkwy., Suite 100, West Palm Beach, FL 33411

PURCHASE: Full sets of Bidding Documents may be examined at the Architect/Engineer's office and local plan rooms. Full sets may be purchased through the Architect/Engineer for \$ 75.00 Per set for the printing and handling costs.

PUBLIC ENTITY CRIME LAW: In accordance with the Rules for the Administration of Purchasing Program, Chapter 6C-17, F.A.C., subsection 6C-18.050(6), F.A.C., effective January 13, 1999:

The University shall not accept a competitive solicitation from or purchase commodities or contractual services from a person or affiliate who has been convicted of a public entity crime and has been placed on the State of Florida's convicted vendor list for a period of 36 months from the date of being added to the convicted vendor list.

PRE-BID MEETING: There will be a mandatory pre-bid conference scheduled for May 5, 2005 at 10:30 a.m. in the Facilities Planning conference room in Building 69 on the Boca Raton campus of FAU. There will be a walk through of the site after the meeting. Please confirm attendance by emailing Steven Saposnik at saposnik@fau.edu.

SPECIAL ACCOMMODATIONS: Persons with a disability requiring accommodation should contact the FAU Equal Opportunity Programs Office, (561)297-3004, at least five (5) working days in advance to make appropriate arrangements. Persons with hearing or speech impairments should contact the same by using the Florida Dual Party Relay System, 1(800)955-8770 (Voice) or 1(800)955-8771 (TDD).

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."

REGIONAL TRANSPORTATION AUTHORITIES

REQUEST FOR PROPOSAL NO. 05-720 GENERAL BANKING SERVICES

The South Florida Regional Transportation Authority (SFRTA), an agency of the State of Florida, operates Tri-Rail, a seventy-two (72) mile commuter railroad with eighteen (18) stations in Miami-Dade, Broward, and Palm Beach Counties.

THE PURPOSE of the RFP is to obtain the services of a financial institution to provide all banking services required by SFRTA. The services shall include, but not be limited to, the establishment of multiple disbursement checking accounts, a revenue account, and a payroll checking account. These bank accounts shall be consolidated into a control account that will be set-up as a Zero Balance Account (ZBA) with cash balances invested daily. Credit card transaction clearinghouse service is

required with interface capability with a credit card service provider as well as processing capabilities for VISA, Discover, and MasterCard charges. General banking services to include electronic banking services, processing of incoming and outgoing wire transfers, verification of cash deposits, maintenance of monthly statements, and rental of a safety deposit box. The term of the Agreement will be three (3) years with SFRTA's option of extending the term for two (2) additional one-year periods.

A REQUEST FOR DOCUMENTS should be directed to Mr. Robert Becker at SFRTA, 800 N. W. 33 Street, Suite 100, Pompano Beach, Florida 33064, (954)788-7909. The cost of the solicitation document is Fifty Dollars (\$50.00) non-refundable. Checks or money orders made payable to SFRTA should be forwarded to Mr. Becker at the address above. Solicitation documents will be available on or about April 18, 2005.

A PRE-PROPOSAL CONFERENCE will be held in the SFRTA Board Room at the address above on April 26, 2005 at 10:00 a.m. The purpose of the meeting will be for SFRTA to respond to questions from document holders and clarify requirements in an open forum. Attendance is not mandatory but is recommended.

RECEIPT OF SEALED PROPOSALS: All proposals must be received in a sealed envelope no later than 5:00 p.m. on May 19, 2005 at the SFRTA office in Pompano Beach.

SFRTA reserves the right to postpone, to accept, or reject any and all proposals in whole or in part. All Proposers must certify that they are not on the State of Florida Comptroller General's List of Ineligible Bidders. All proposals must remain in effect for One Hundred Eighty (180) days from the RFP submission due date.

DEPARTMENT OF CORRECTIONS

ADVERTISEMENT FOR BID

PROPOSALS ARE REQUESTED FROM QUALIFIED GENERAL CONTRACTORS BY THE STATE OF FLORIDA, DEPARTMENT OF CORRECTIONS, FOR THE CONSTRUCTION OF:

PROJECT NO: BE-31

PROJECT NAME & LOCATION: Wastewater Treatment Plant Upgrade to include a surge/anoxic tank, blowers and air piping, surge pumps, return sludge pumps, internal recycle pumps, submersible mixers and associated piping and valves at Mayo Correctional Institution, 8487 U. S. Highway 27, West, Mayo, Florida.

FOR: State of Florida, Department of Corrections – Region II
PERFORMANCE BOND AND LABOR AND MATERIAL PAYMENT BOND: If the construction contract award amount is \$100,000.00 (one hundred thousand dollars) or less, a Performance Bond and a Labor and Material Payment Bond are not required.

PUBLIC ENTITY CRIME INFORMATION STATEMENT: A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, F.S., for Category Two for a period of 36 months from the date of being placed on the convicted vendor list.

PREQUALIFICATION: Each bidder whose field is governed by Chapters 399, 489, and 633 of the F.S. for licensure or certification must submit prequalification data of their eligibility to submit proposals five (5) calendar days prior to the bid opening date if not previously qualified by the Department for the current biennium (July 1 through June 30) of odd numbered years. After the bid opening the low bidder must qualify in accordance with Rule 60D-5.004, F.A.C.

A copy of the rule requirements is included in the Instruction To Bidders under Article B-2 "Bidder Qualification Requirements and Procedures".

Sealed bids will be received, publicly opened, and read aloud on:

DATE AND TIME: May 25, 2005, 2:00 p.m. Local time

PLACE: Hatch Mott Macdonald, 3800 Esplanade Way, Suite 150, Tallahassee, FL 32311

Any person with a qualified disability requiring special accommodations at the pre-bid conference and/or bid/proposal opening shall contact the person listed below at least (5) working days prior to the event. If you are hearing or speech impaired, please contact this office by using the Florida Relay Services, 1(800)955-8771 (TDD).

PROPOSAL: Bids must be submitted in full in accordance with the requirements of the Drawings, Specifications, Bidding Conditions and Contractual Conditions, which may be examined and obtained from the:

ENGINEER: Hatch Mott Macdonald, 3800 Esplanade Way, Suite 150, Tallahassee, FL 32311

TELEPHONE: (850)222-0334, Attention: Michael P. Murphy, P. E.

A mandatory pre-bid conference will be held on May 11, 2005 at 2:00 p.m. local time, at the Mayo Correctional Institution's Administration Building, Conference Room. A brief walk through of the work area will be available as part of the pre-bid conference.

Drawings and specifications may be purchased for a non-refundable price of \$75.00 per set from the Architect/Engineer.

CONTRACT AWARD: Bid Tabulation and Notice of Award Recommendation will be sent to all bidders by Facsimile, Return Receipt Required. If no protest is filed per Article B-20 of the Instructions to Bidders, "Bid Protests, Points of Entry", the contract will be awarded by the Secretary, Department of Corrections. Right is reserved to reject any or all bids.

WATER MANAGEMENT DISTRICTS

Request for Qualifications 04/05-030 LA

Approved Surveyor List

To ensure a consistent level of quality in surveying services and reduce administrative costs, the Suwannee River Water Management District (District) is initiating a list of surveyors who are pre-qualified for District assignments. The District expects to choose five to ten surveyors for this list. The list will be reviewed annually and may, at the District's option, be recommended for re-approval for up to two additional years. Also being considered for the first time is a review surveyor or surveying firm to contract with the District for survey review services.

Surveyors or surveying firms interested in being considered for District surveying work and/or review surveyor services should complete the Surveyor Respondent Form which may be found on the District's website www.mysuwanneeriver.com and submit it to District headquarters in Live Oak, Florida, prior to 4:00 p.m. May 20, 2005.

A mandatory pre-qualification meeting will be held at District Headquarters at 2:00 p.m. on May 5, 2005. Only those surveyors or surveying firms who attend this meeting will be considered for the Approved Surveyor List or Review Surveyor.

For more information contact: Gwen Lord, Administrative Assistant, 9225 CR 49, Live Oak, Florida 32060, (386)362-1001 or 1(800)226-1066, e-mail: lord_g@srwmd.state.fl.us.

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 CHILDREN AND FAMILY SERVICES**INVITATION TO BID**

Sealed bids are being received from qualified contractors, by the State of Florida, Department of Children and Family Services, for the following project:

PROJECT NUMBER: DCF-04220220

PROJECT NAME: Install Fire Sprinklers, Bldg. 1243, Florida State Hospital (Chattahoochee).

BID DATE AND TIME: May 19, 2005 until 1:30 p.m. Eastern Daylight Time

PLACE OF BID OPENING: Operations & Facilities Conference Room, Florida State Hospital, Highway 90, East, Chattahoochee, FL 32324. Telephone: (850)663-7152.

BID REQUIREMENTS: Bids must be submitted in full accordance with the requirements of the drawings, specifications, bidding conditions and contractual conditions, which may be obtained from: Pinnacle Engineering Group, P.A., 3303 Thomasville Road, Suite 102, Tallahassee, FL 32312, (850)422-1763, Fax (850)422-1502.

CONTRACTOR QUALIFICATIONS: Bidders shall be state-certified in accordance with Chapter 633, F.S., as a Contractor I or a Contractor II. Bidders not able to furnish proof of required certification are subject to disqualification.

ADDITIONAL INFORMATION: A mandatory pre-bid walk-through will be held on May 5, 2005 at 10:00 a.m. EDT at the Operations & Facilities Conference Room, Florida State Hospital, Highway 90 East, Chattahoochee, FL 32324. Site Contact is Richard Frey, Telephone: (850)663-7152.

CORPORATE REGISTRATION: No bid shall be accepted from any corporation which is not able to demonstrate current corporate charter registration (for a domestic corporation) or authority to transact business within the State of Florida (for a foreign corporation).

PERFORMANCE BOND AND LABOR AND MATERIAL BOND: On any construction contract for which the award amount is greater than \$100,000, a Performance Bond and a Labor And Material Payment Bond is required.

CONTRACT AWARD: The Bid Tabulation and Notice of Award Recommendation will be posted at 4:00 p.m. on the date and at the location where the bids are opened. Upon acceptance of the award recommendation by the Department, a contract will be awarded by the Office of General Services. In the event that the Bid Tabulation and Notice of Award cannot be posted in the above manner, then all bidders will be notified by certified U.S. mail, return receipt requested. The Department of Children and Family Services reserves the right to reject any and all bids in the best interest of the State of Florida.

MINORITY PARTICIPATION: In accordance with F.S., the Department of Children & Families is encouraged to target certified minority business enterprises (MBEs) for 21 percent

of total awarded construction contract dollar value (4% for African-American, 6% for Hispanic-American, and 11% for women-owned). The Department of Children & Families encourages minority businesses to participate in the bidding process, including any bidders conferences or pre-bid meetings which are scheduled. The Department of Children & Families further encourages contractors to utilize certified MBEs as subcontractors or subvendors whenever possible. An online directory of certified MBEs, available on the website of the Office of Supplier Diversity (<http://osd.dms.state.fl.us/dirhome.htm>), may be searched by county for construction-related products and services.

FISH AND WILDLIFE CONSERVATION COMMISSION**NOTICE TO PROFESSIONAL CONSULTANTS
PUBLIC ANNOUNCEMENT FOR PROFESSIONAL
SERVICES FOR ENGINEERING**

The Florida Fish and Wildlife Conservation Commission announce that professional services in the disciplines of civil and architectural engineering with specific expertise in the design of fish research and production hatcheries will be required for the project listed below.

PROJECT NUMBER: FWC 04/05-98

PROJECT NAME: Stock Enhancement Research
Facility Project

PROJECT LOCATION: Manatee County, Florida

SERVICES TO BE PROVIDED: The Design Professional is expected to schedule services and design phases (preliminary and final design), request additional services (soil and water tests, surveys, permits,...etc) leading to a design solution with adequate documentation.

RESPONSE DUE DATE: May 6, 2005, 3:00 p.m. EDT

To request a complete Request For Statement Of Qualifications, download from the Vendor Bid System (VBS) web site or contact the Commission Engineer:

Mahmoud Madkour, Ph.D., P.E.

Division of Habitat and Species Conservation

620 South Meridian Street, Room 370D

Tallahassee, Florida 32399-1600

Tel: (850)488-5531

Fax: (850)921-1750

e-mail: mahmoud.madkour@myfwc.com

EASTPOINT WATER AND SEWER DISTRICT**ADVERTISEMENT FOR BIDS**

SEALED BIDS for the EASTPOINT FLORIDAN AQUIFER MULTIWELL AQUIFER TEST will be received by JIM STIDHAM & ASSOCIATES, INC. 547 NORTH MONROE STREET, SUITE 201, TALLAHASSEE, FLORIDA 32301 until 2:00 p.m., eastern time, May 2, 2005. Bids will be

publicly opened at 2:00 p.m. EST, at this location. Bids shall be submitted in a sealed envelope, plainly marked with Bidders name, address, date and time of bid opening, bid number and bid title: "EASTPOINT FLORIDAN AQUIFER MULTIWELL AQUIFER TEST".

DESCRIPTION OF PROPOSED WORK: The work includes furnishing of everything necessary for the construction, development, and testing of a Floridan Aquifer pump test.

Copies of the Contract Documents are on file at the office of: Jim Stidham & Associates, Inc., 547 North Monroe St., Suite 201, Tallahassee, Florida 32301; Baskerville-Donovan, Inc., 449 West Main Street, Pensacola, Florida 32502; Eastpoint Water and Sewer District office, 40 Island Drive, Eastpoint, Florida 32328; FW Dodge Plan Room, 201 South F Street, Pensacola, Florida 32501. They may be examined at the above address or copies will be provided to the Bidder by Jim Stidham & Associates, Inc. at a fee of One Hundred and Fifty Dollars (\$150.00) per set. This payment is non-refundable. Partial sets will NOT be issued.

The Eastpoint Water and Sewer District reserves the right to accept or reject any and all bids in whole or in part, to waive informalities in the bidding or bidding documents, to obtain new bids, or to postpone the bid opening. Each bid shall be valid for a period of ninety (90) days after the bid opening.

FLORIDA DEVELOPMENTAL DISABILITIES COUNCIL

REQUEST FOR PROPOSALS (FDDC # 2005-HC-2300)

The Florida Developmental Disabilities Council (FDDC) announces the availability of a Request for Proposals. This RFP is being issued to develop a social marketing campaign to raise the public awareness of the mental health needs of children ages birth to age five and the consequences of poor social-emotional development.

Goals:

1. Develop a public awareness campaign with a clear, concise and consistent message regarding the importance of infant mental health and prevention.
2. Develop specific strategies to increase knowledge of infant mental health issues among professionals such as those who work in mental health, health care, early childhood programs, human service agencies, judicial systems, law enforcement and the general public.

The primary components of this RFP should include the development of numerous options for marketing the infant mental health media campaign and the enlistment of a spokesperson to champion the campaign. This campaign will engage community groups, inform decision makers, partner with local groups, educate parents and prospective parents, healthcare professionals and others on the importance of early social/emotional development for very young children.

The media campaign will include the development and dissemination of public service announcements through a media partnership with public service stations, press organizations, press clubs, media companies, television and radio personnel and others to help promote the campaign message.

It will also include the development of information/education materials to provide information on the importance of social/emotional development of very young children. This material should be targeted to the following:

1. Parents and prospective parents.
2. Healthcare professionals who work with young children.
3. Child Care Centers: Preschools, both public and faith-based and other organizations that work with very young children.
4. Educators and Administrators to ensure that they incorporate social and emotional development and healthy relationships into guidance, life management and other school curricula.
5. Businesses to ensure that they develop a family-friendly policy that enables parents to have quality time with their young children.
6. Legislators and state decision makers to understand the cost savings of early intervention programs.

Individuals, not-for-profit and for-profit agencies may submit proposal in response to this RFP. The approximate amount of funds available for project awarded based on this RFP will be up to \$75,000. The exact amount of this contract will be developed during contract negotiations.

Copies of this RFP will be available from the Florida Developmental Disabilities Council, 124 Marriott Drive, Suite 203, Tallahassee, FL 32301, (850)488-4180 or Toll Free 1(800)580-7801 or TDD Toll Free 1(888)488-8633. The deadline for submitting letters of intent and written questions is June 2, 2005 by 4:00 p.m. EDT. Letters of Intent will only be accepted by fax, mail, or hand delivery. Letters of Intent by e-mail will not be accepted. The deadline for submitting proposals is 4:00 p.m. EDT on July 14, 2005.

REQUEST FOR PROPOSALS (FDDC # 2005-HC-2400)

The Florida Developmental Disabilities Council (FDDC) announces the availability of a Request for Proposals. This RFP is being issued to develop a project to demonstrate and collect information on the feasibility, costs, and appropriateness of telemedicine for improving access to health services for individuals with developmental disabilities. This project will demonstrate how telemedicine can be used as an effective tool for the development of integrated, quality systems of health care for this population. This RFP will include the development of a model or "blueprint" for telemedicine healthcare reimbursement for individuals with developmental disabilities and will include collaboration with established state Medicaid program representatives. The

providers will identify an overall master plan and strategies for developing Medicaid reimbursement for services. The providers will develop a systemic approach to assisting Florida with development of reimbursement policies, and identify potential cost savings based on provision of services provided via telemedicine for transportation savings for the Medicaid program and prepare reports or data on potential cost savings. Finally, to develop a resource network of telemedicine reimbursement "experts" to provide collaboration for telemedicine providers and state Medicaid agencies to provide assistance to programs considering adding telemedicine reimbursement.

Individuals, not-for-profit and for-profit agencies may submit proposal in response to this RFP. The approximate amount of funds available for project awarded based on this RFP will be up to \$75,000. The exact amount of this contract will be developed during contract negotiations.

Copies of this RFP will be available from the Florida Developmental Disabilities Council, 124 Marriott Drive, Suite 203, Tallahassee, FL 32301, (850)488-4180 or Toll Free 1(800)580-7801 or TDD Toll Free 1(888)488-8633. The deadline for submitting letters of intent and written questions is June 2, 2005 by 4:00 p.m. EDT. Letters of Intent will only be accepted by fax, mail, or hand delivery. Letters of Intent by e-mail will not be accepted. The deadline for submitting proposals is 4:00 p.m. EDT on July 14, 2005.

Section XII Miscellaneous

DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

NOTICE OF ACCEPTANCE OF APPLICATIONS ENDANGERED AND THREATENED NATIVE FLORA GRANTS PROGRAM

The Florida Department of Agriculture and Consumer Services, Division of Plant Industry announces that it is once again soliciting applications for the Endangered and Threatened Native Flora Grants Program.

Grants may be awarded for activities which provide recognition of those native flora to the state that are endangered and threatened; and activities that encourage, within a controlled program, the protection, curation, propagation, reintroduction and monitoring of native flora that are identified as endangered or threatened.

Who is eligible to apply? By law, a qualified corporation is a not-for-profit corporation pursuant to s. 501 (c) (3) of the Internal Revenue Code of 1954, and which is described in, and allowed to receive contributions pursuant to the provisions of, s. 170 of the Internal Revenue Code of 1954, and which is a corporation not for profit incorporated pursuant to Chapter

617, F.S., and which can demonstrate, based on program criteria, the ability to protect, conserve, propagate, reintroduce and monitor endangered and threatened native flora.

If the projects receive legislative approval, funds will become available after July 1, 2006. The deadline for filing applications is July 29, 2005 and applications must be delivered to the Division of Plant Industry's Plant Inspection office by 5:00 p.m. on that date or be clearly postmarked on or before that date.

Further information and an application may be obtained from Mr. Dan Phelps, Division of Plant Industry, Bureau of Plant and Apiary Inspection, P. O. Box 147100, Gainesville, Florida 32614-7100, (352)372-3505, Ext. 162, Fax (352)955-2301, e-mail: phelpsd@doacs.state.fl.us.

DEPARTMENT OF TRANSPORTATION

The Florida Department of Transportation intends to issue an "Airport Site Approval Order," in accordance with Chapter 330, F.S., "Regulation of Aircraft, Pilots, and Airports" and Chapter 14-60, F.A.C., "Airport Licensing, Registration, and Airspace Protection" for the following site:

Brooksville Regional Hospital, a private airport, in Hernando County, at Latitude 28° 32' 27" and Longitude 82° 26' 18", to be owned and operated by Mr. Gustave Garza, P. O. Box 371 (7240 Cortez Blvd.), Brooksville Florida 34601.

A copy of the Airport Site Approval Order, the Airport's application, the applicable rules, and other pertinent information may be obtained by contacting: Mr. William J. Ashbaker, P.E., State Aviation Manager, Florida Department of Transportation, Aviation Office, 605 Suwannee Street, Mail Station 46, Tallahassee, Florida 32399-0450, (850)414-4500, e-mail: aviation.fdot@dot.state.fl.us, website: <http://www.dot.state.fl.us/aviation>.

ADMINISTRATIVE HEARING RIGHTS: Any person whose substantial interests will be determined or affected by this Airport Site Approval Order has the right, pursuant to Section 120.57, F.S., to petition for an administrative hearing. The petition for an administrative hearing must conform to the requirements of Rule Chapter 28-106, F.A.C., and must be filed, in writing, within twenty-one days of the publication of this notice, with the Clerk of Agency Proceedings, Office of General Counsel, Florida Department of Transportation, 605 Suwannee Street, Mail Station 58, Room 550, Tallahassee, Florida 32399-0450. Failure to file a petition within the allowed time constitutes a waiver of any right such person has to request a hearing under Chapter 120, F.S.

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Notice of Publication for a New Point
Franchise Motor Vehicle Dealer in a County of More
than 300,000 Population

Pursuant to Section 320.642, F.S., Bourget's Bike Works, Inc., intends to allow the establishment of Space Coast Bourget's Bike Works, LLC., as a dealership for the sale of Bourget's motorcycles, at 3345 North Courtney Parkway, Suite # 113, Merritt Island (Brevard County), Florida 32952, on or after March 1, 2005.

The name and address of the dealer operator(s) and principal investor(s) of Space Coast Bourget's Bike Works, LLC., are dealer operator: Gregory Pulitano, 3345 North Courtney Parkway, Merritt Island, Florida 32952; principal investor(s): Gregory Pulitano, 74 Fulham Lane, Holbrook, New York 11741; Eric Danoy, 808 Bayside Drive, Cape Canaveral, Florida 32920.

The notice indicates intent to establish the new point location in a county of more than 300,000 population, according to the latest population estimates of the University of Florida, Bureau of Economic and Business Research.

Certain dealerships of the same line-make may have standing, pursuant to Section 320.642, F.S., to file a petition or complaint protesting the application.

Written petitions or complaints must be received by the Department of Highway Safety and Motor Vehicles within 30 days of the date of publication of this notice and must be submitted to: Mr. Ronald D. Reynolds, Administrator, Dealer License Section, Department of Highway Safety and Motor Vehicles, Room A-312, Neil Kirkman Building, 2900 Apalachee Parkway, Tallahassee, Florida 32399-0635.

A copy of such petition or complaint must also be sent by US Mail to: Brigitte M. Bourget, VP, Bourget's Bike Works, Inc., 21407 North Central Avenue, Phoenix, Arizona 85024-5100.

If no petitions or complaints are received within 30 days of the date of publication, a final order will be issued by the Department of Highway Safety and Motor Vehicles approving the establishment of the dealership, subject to the applicant's compliance with the provisions of Chapter 320, F.S.

Notice of Publication for a New Point
Franchise Motor Vehicle Dealer in a County of More
than 300,000 Population

Pursuant to Section 320.642, F.S., Mod Cycles Corp., intends to allow the establishment of Bikes, Parts & Cruisers, Inc., d/b/a Bikes, Parts & Cruisers, as a dealership for the sale of Yumbo cycles, at 18524 US Highway 19, Hudson, FL 34667, on or after March 31, 2005.

The name and address of the dealer operator(s) and principal investor(s) of Bikes, Parts & Cruisers, Inc., d/b/a Bikes, Parts & Cruisers, are dealer operator: John A. Wolding, 5267 Palisades Drive, Weeki Wachee, FL 34607; principal investor(s): John A. Wolding, 5267 Palisades Drive, Weeki Wachee, FL 34607.

The notice indicates intent to establish the new point location in a county of more than 300,000 population, according to the latest population estimates of the University of Florida, Bureau of Economic and Business Research.

Certain dealerships of the same line-make may have standing, pursuant to Section 320.642, F.S., to file a petition or complaint protesting the application.

Written petitions or complaints must be received by the Department of Highway Safety and Motor Vehicles within 30 days of the date of publication of this notice and must be submitted to: Mr. Ronald D. Reynolds, Administrator, Dealer License Section, Department of Highway Safety and Motor Vehicles, Room A-312, Neil Kirkman Building, 2900 Apalachee Parkway, Tallahassee, Florida 32399-0635.

A copy of such petition or complaint must also be sent by US Mail to: Luz Martinez, MOD Cycles Corp., 7547 N. W. 52nd Street, Miami, FL 33166.

If no petitions or complaints are received within 30 days of the date of publication, a final order will be issued by the Department of Highway Safety and Motor Vehicles approving the establishment of the dealership, subject to the applicant's compliance with the provisions of Chapter 320, F.S.

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."

AGENCY FOR HEALTH CARE ADMINISTRATION

The Agency for Health Care Administration has received an emergency service exemption application from Winter Haven Hospital, 200 Avenue F, Northeast, Winter Haven, Florida 33881, pursuant to Section 395.1041(3), F.S., and Rule 59A-3.255, F.A.C. The emergency service for which the exemption is requested is "Neurosurgery." Comments received within 15 days of publication will be considered by the Agency prior to making a determination of exemption status.

Additional information may be obtained by writing: Agency for Health Care Administration, 2727 Mahan Drive, MS #31, Tallahassee, Florida 32308, (850)414-0360, e-mail: Pat Underwood, Hospital and Outpatient Services Unit, underwop@ahca.myflorida.com.

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

On April 11, 2005, John O. Agwunobi, M.D., M.B.A., Secretary of the Department of Health, issued an Order of Emergency Suspension with regard to the license of Robert J. Russell, D.C. license number CH 6142. This Emergency Suspension Order was predicated upon the Secretary's findings of an immediate and serious danger to the public health, safety and welfare pursuant to Sections 456.073(8) and 120.60(6), F.S. The Secretary determined that this summary procedure was fair under the circumstances, in that there was no other method available to adequately protect the public.

On April 11, 2005, John O. Agwunobi, M.D., M.B.A., Secretary of the Department of Health, issued an Order of Emergency Suspension with regard to the license of Michael Jay Fabricant, D.C. license number CH 4911. This Emergency Suspension Order was predicated upon the Secretary's findings of an immediate and serious danger to the public health, safety and welfare pursuant to Sections 456.073(8) and 120.60(6), F.S. The Secretary determined that this summary procedure was fair under the circumstances, in that there was no other method available to adequately protect the public.

On April 8, 2005, John O. Agwunobi, M.D., M.B.A., M.P.H., Secretary of the Department of Health, issued an Order of Emergency Suspension with regard to the license of David Rutherford, L.M.T., license number MA 40917. This Emergency Suspension Order was predicated upon the Secretary's findings of an immediate and serious danger to the public health, safety and welfare pursuant to Sections 456.073(8) and 120.60(6), F.S. The Secretary determined that this summary procedure was fair under the circumstances, in that there was no other method available to adequately protect the public.

On April 6, 2005, John O. Agwunobi, M.D., M.B.A., Secretary of the Department of Health, issued an Order of Emergency Suspension with regard to the license of Donald Tobkin, M.D. license number ME 30942. This Emergency Suspension Order was predicated upon the Secretary's findings of an immediate and serious danger to the public health, safety and welfare pursuant to Sections 456.073(8) and 120.60(6), F.S. The Secretary determined that this summary procedure was fair under the circumstances, in that there was no other method available to adequately protect the public.

On April 8, 2005, John O. Agwunobi, M.D., M.B.A., Secretary of the Department of Health, issued an Order of Emergency Suspension with regard to the license of Carolyn Patricia Gamal-Eldin, R.N., license number 1840712. This Emergency Suspension Order was predicated upon the Secretary's findings of an immediate and serious danger to the public health, safety and welfare pursuant to Sections 456.073(8) and 120.60(6), F.S. The Secretary determined that this summary procedure was fair under the circumstances, in that there was no other method available to adequately protect the public.

On April 11, 2005, John O. Agwunobi, M.D., M.B.A., Secretary of the Department of Health, issued an Order of Emergency Suspension with regard to the certificate of Cassandra Goodman, C.N.A. certificate number 0197*****1839. This Emergency Suspension Order was predicated upon the Secretary's findings of an immediate and serious danger to the public health, safety and welfare pursuant to Sections 456.073(8) and 120.60(6), F.S. The Secretary determined that this summary procedure was fair under the circumstances, in that there was no other method available to adequately protect the public.

On April 8, 2005, John O. Agwunobi, M.D., M.B.A., Secretary of the Department of Health, issued an Order of Emergency Suspension with regard to the license of Helen Mary Beaudoin, R.N., license number 3164152. This Emergency Suspension Order was predicated upon the Secretary's findings of an immediate and serious danger to the public health, safety and welfare pursuant to Sections 456.073(8) and 120.60(6), F.S. The Secretary determined that this summary procedure was fair under the circumstances, in that there was no other method available to adequately protect the public.

DEPARTMENT OF FINANCIAL SERVICES

DIVISION OF TREASURY
BUREAU OF COLLATERAL MANAGEMENT
PUBLIC DEPOSITS SECTION

FOR PUBLIC DEPOSITORS TO RECEIVE THE PROTECTION FROM LOSS PROVIDED IN CHAPTER 280, F.S., THEY SHALL COMPLY WITH THE FOLLOWING ON EACH PUBLIC DEPOSIT ACCOUNT IN ADDITION TO ANY OTHER REQUIREMENTS SPECIFIED IN CHAPTER 280: (1) EXECUTE THE PUBLIC DEPOSIT IDENTIFICATION AND ACKNOWLEDGMENT FORM DFS-J1-1295 WITH THE QUALIFIED PUBLIC DEPOSITORY (QPD), MAINTAIN IT AS A VALUABLE RECORD, AND CONFIRM THE ACCOUNT ANNUALLY; (2) EXECUTE A REPLACEMENT FORM DFS-J1-1295 WHEN THERE IS A MERGER, ACQUISITION, NAME CHANGE, OR OTHER EVENT WHICH CHANGES THE ACCOUNT NAME, ACCOUNT NUMBER, OR NAME OF THE QPD.

THE FOLLOWING QPDS ARE AUTHORIZED TO HOLD PUBLIC DEPOSITS. THEY ARE LISTED UNDER THE STATE OF HOME OFFICE LOCATION. **INSTITUTIONS MARKED WITH AN ASTERISK HAVE LIMITED THE AMOUNT OF PUBLIC DEPOSITS THEY WILL ADMINISTER AND ARE NOT ACCEPTING NEW PUBLIC DEPOSIT ACCOUNTS.** DEPOSITORIES HAVING A DATE BESIDE THEIR NAME ARE IN THE PROCESS OF WITHDRAWING FROM THE PROGRAM AND SHALL NOT RECEIVE OR RETAIN PUBLIC DEPOSITS AFTER THE DATE SHOWN. THEY MAY, HOWEVER, HAVE CERTAIN OBLIGATIONS TO THE PROGRAM AFTER THAT DATE WITH WHICH THEY MUST COMPLY BEFORE CONCLUDING THE WITHDRAWAL PROCESS.

ALABAMA

ATMORE
UNITED BANK

BIRMINGHAM
AMSOUTH BANK
COMPASS BANK
REGIONS BANK

MONTGOMERY
COLONIAL BANK, N.A.

WARRIOR
THE BANK

FLORIDA

ALACHUA
FIRST NATIONAL BANK OF ALACHUA

APALACHICOLA
COASTAL COMMUNITY BANK

ARCADIA
FIRST STATE BANK OF ARCADIA

AVENTURA
TURNBERRY BANK

BARTOW
CITRUS & CHEMICAL BANK
COMMUNITY NATIONAL BANK AT BARTOW

BELLE GLADE
BANK OF BELLE GLADE

BOCA RATON
FIRST SOUTHERN BANK
FIRST UNITED BANK
POINTE BANK

BONIFAY
BANK OF BONIFAY

BRADENTON

COAST BANK OF FLORIDA
FIRST AMERICA BANK
FIRST NATIONAL BANK & TRUST
FLAGSHIP NATIONAL BANK

BRANDON

PLATINUM BANK

BROOKSVILLE

HERNANDO COUNTY BANK

CAPE CORAL

RIVERSIDE BANK OF THE GULF COAST

CARRABELLE

GULF STATE COMMUNITY BANK

CASSELBERRY

R-G CROWN BANK

CHIEFLAND

DRUMMOND COMMUNITY BANK

CLEWISTON

FIRST BANK OF CLEWISTON
OLDE CYPRESS COMMUNITY BANK

CORAL GABLES

BANKUNITED, F.S.B.
COMMERCEBANK, N.A.
GIBRALTAR BANK, F.S.B.
INTERNATIONAL BANK OF MIAMI, N.A.

CRAWFORDVILLE

CITIZENS BANK – WAKULLA
WAKULLA BANK

CRESTVIEW

FIRST NATIONAL BANK OF CRESTVIEW

CRYSTAL RIVER

CRYSTAL RIVER BANK

DADE CITY

FIRST NATIONAL BANK OF PASCO

DANIA BEACH

COMMUNITY BANK OF BROWARD

DAVIE

REGENT BANK

DEBARY

FIRST COMMUNITY BANK

DESTIN

DESTIN BANK

DUNNELLON

DUNNELLON STATE BANK

ENGLEWOOD

ENGLEWOOD BANK
PENINSULA BANK

FERNANDINA BEACH

FIRST COAST COMMUNITY BANK
FIRST NATIONAL BANK OF NASSAU COUNTY

FORT LAUDERDALE

BANKATLANTIC
EQUITABLE BANK
LANDMARK BANK, N.A.

FORT MYERS

BUSEY BANK FLORIDA
EDISON NATIONAL BANK
IRONSTONE BANK

FORT PIERCE

HARBOR FEDERAL SAVINGS BANK
RIVERSIDE NATIONAL BANK OF FLORIDA

FORT WALTON BEACH

BEACH COMMUNITY BANK
FIRST CITY BANK OF FLORIDA
FIRST NATIONAL BANK & TRUST

FROSTPROOF

CITIZENS BANK & TRUST

GAINESVILLE

MERCHANTS & SOUTHERN BANK
MILLENNIUM BANK

GRACEVILLE

*BANK OF JACKSON COUNTY
PEOPLES BANK OF GRACEVILLE

HALLANDALE

DESJARDINS BANK, N.A.

HOMESTEAD

COMMUNITY BANK OF FLORIDA
FIRST NATIONAL BANK OF SOUTH FLORIDA

HOMOSASSA

HOMOSASSA SPRINGS BANK

IMMOKALEE

FLORIDA COMMUNITY BANK

INDIANTOWN

FIRST BANK OF INDIANTOWN

INVERNESS

BANK OF INVERNESS

JACKSONVILLE

EVERBANK

JACKSONVILLE BEACH

OCEANSIDE BANK

KEY LARGO

TIB BANK OF THE KEYS

KEY WEST

FIRST STATE BANK OF THE FLORIDA KEYS

KISSIMMEE

FIRST NATIONAL BANK OF OSCEOLA COUNTY

LAKE CITY

COLUMBIA COUNTY BANK
PEOPLES STATE BANK

LANTANA

STERLING BANK

LEESBURG

CENTERSTATE BANK MID FLORIDA
FIRST FEDERAL SAVINGS BANK OF LAKE COUNTY

LIVE OAK

FIRST FEDERAL SAVINGS BANK OF FLORIDA

LONGWOOD

*ORLANDO NATIONAL BANK

MADISON

MADISON COUNTY COMMUNITY BANK

MALONE

PCB, THE COMMUNITY BANK

MARATHON

MARINE BANK OF THE FLORIDA KEYS

MAYO

LAFAYETTE STATE BANK

MIAMI

BAC FLORIDA BANK
CITY NATIONAL BANK OF FLORIDA
COCONUT GROVE BANK
COMMERCIAL BANK OF FLORIDA
CONTINENTAL NATIONAL BANK OF MIAMI
EAGLE NATIONAL BANK OF MIAMI
EASTERN NATIONAL BANK
ESPIRITO SANTO BANK
EXECUTIVE NATIONAL BANK
INTERAMERICAN BANK, F.S.B.
MELLON UNITED NATIONAL BANK
METRO BANK OF DADE COUNTY
NORTHERN TRUST BANK OF FLORIDA, N.A.
OCEAN BANK
SOFISA BANK OF FLORIDA
TOTALBANK
TRANSATLANTIC BANK
U.S. CENTURY BANK

MIAMI BEACH

BEACH BANK

MILTON

FIRST NATIONAL BANK OF FLORIDA

MONTICELLO

FARMERS & MERCHANTS BANK

MOUNT DORA

FIRST NATIONAL BANK OF MOUNT DORA
FLORIDA CHOICE BANK

NAPLES

BANK OF NAPLES
COMMUNITY BANK OF NAPLES, N.A.
ORION BANK

NEW SMYRNA BEACH

FRIENDS BANK

NICEVILLE

PEOPLES NATIONAL BANK

NORTH LAUDERDALE

SECURITY BANK, N.A.

NORTH MIAMI

KISLAK NATIONAL BANK

NORTH PALM BEACH

ENTERPRISE NATIONAL BANK OF PALM BEACH

OAKLAND PARK

AMERICAN NATIONAL BANK

OCALA

COMMUNITY BANK & TRUST OF FLORIDA

FLORIDA CITIZENS BANK

INDEPENDENT NATIONAL BANK

OKEECHOBEE

BIG LAKE NATIONAL BANK

ORANGE PARK

FIRST NATIONAL BANK

HERITAGE BANK OF NORTH FLORIDA

ORLANDO

CENTURY NATIONAL BANK

CNLBANK

MERCANTILE BANK

UNITED HERITAGE BANK

ORMOND BEACH

CYPRESSCOQUINA BANK

OVIEDO

CITIZENS BANK OF OVIEDO

PALATKA

FIRST FEDERAL BANK OF NORTH FLORIDA

PUTNAM STATE BANK

PALM HARBOR

PEOPLES BANK

PANAMA CITY

BAY BANK & TRUST COMPANY

FIRST NATIONAL BANK NORTHWEST FLORIDA

PEOPLES FIRST COMMUNITY BANK

PENSACOLA

BANK OF PENSACOLA

BANK OF THE SOUTH

FIRST GULF BANK, N.A.

GULF COAST COMMUNITY BANK

PERRY

CITIZENS BANK OF PERRY

PORT RICHEY

GULFSTREAM COMMUNITY BANK

PORT ST. JOE

BAYSIDE SAVINGS BANK

PORT ST. LUCIE

FIRST PEOPLES BANK

ST. AUGUSTINE

BANK OF ST. AUGUSTINE

PROSPERITY BANK

ST. CLOUD

PUBLIC BANK

ST. PETERSBURG

FIRST COMMUNITY BANK OF AMERICA

UNITED BANK & TRUST COMPANY

SANTA ROSA BEACH

BANKTRUST

SEBRING

HEARTLAND NATIONAL BANK

HIGHLANDS INDEPENDENT BANK

SOUTH MIAMI

FIRST NATIONAL BANK OF SOUTH MIAMI

SPRING HILL

FIRST KENSINGTON BANK

STARKE

COMMUNITY STATE BANK

STUART

FIRST NATIONAL BANK & TRUST OF THE TREASURE
COAST
GULFSTREAM BUSINESS BANK

TALLAHASSEE

CAPITAL CITY BANK
HANCOCK BANK OF FLORIDA
PREMIER BANK
TALLAHASSEE STATE BANK
THE BANK OF TALLAHASSEE

TAMPA

BANK OF ST. PETERSBURG
FIRST CITRUS BANK

TEQUESTA

INDEPENDENT COMMUNITY BANK

THE VILLAGES

CITIZENS FIRST BANK

TRENTON

TRI-COUNTY BANK

TRINITY

PATRIOT BANK

UMATILLA

UNITED SOUTHERN BANK

VALPARAISO

VANGUARD BANK & TRUST COMPANY

VERO BEACH

INDIAN RIVER NATIONAL BANK

WAUCHULA

FIRST NATIONAL BANK OF WAUCHULA
WAUCHULA STATE BANK

WEST PALM BEACH

FIDELITY FEDERAL BANK & TRUST
FLAGLER BANK
GRAND BANK & TRUST OF FLORIDA

WEWAHITCHKA

VISION BANK

WILLISTON

PERKINS STATE BANK

WINTER HAVEN

CENTERSTATE BANK OF FLORIDA
FIRST NATIONAL BANK OF POLK COUNTY

WINTER PARK

BANKFIRST
RIVERSIDE BANK OF CENTRAL FLORIDA

ZEPHYRHILLS

COMMUNITY NATIONAL BANK OF PASCO COUNTY

GEORGIA

ATLANTA

SUNTRUST BANK

DARIEN

SOUTHEASTERN BANK

KANSAS

LEAWOOD

GOLD BANK

LOUISIANA

NEW ORLEANS

WHITNEY NATIONAL BANK

MASSACHUSETTS

BOSTON

ONEUNITED BANK

MICHIGAN

GRAND RAPIDS

FIFTH THIRD BANK

MISSISSIPPI

JACKSON

TRUSTMARK NATIONAL BANK

NEW YORK

NEW YORK CITY
INTERVEST NATIONAL BANK

NORTH CAROLINA

CHARLOTTE
BANK OF AMERICA, N.A.
WACHOVIA BANK, N.A.

ROCKY MOUNT
RBC CENTURA BANK

WINSTON-SALEM
BRANCH BANKING & TRUST COMPANY

OHIO

WILMINGTON
LIBERTY SAVINGS BANK, F.S.B.

TENNESSEE

MEMPHIS
UNION PLANTERS BANK, N.A.

VIRGINIA

RESTON
CITIBANK, F.S.B.

THE FOLLOWING IS A LIST OF INSTITUTIONS THAT
HAD A CHANGE SINCE THE LAST PUBLICATION OF
THIS REPORT.

CITIZENS & PEOPLES BANK, N.A.
PENSACOLA
CITIZENS & PEOPLES BANK, N.A. HAS CHANGED ITS
NAME TO FIRST GULF BANK, N.A.

COMMUNITY BANK OF MARION COUNTY
OCALA
COMMUNITY BANK OF MARION COUNTY HAS
CHANGED ITS NAME TO COMMUNITY BANK &
TRUST OF FLORIDA.

**FIRST COMMUNITY BANK OF PALM BEACH
COUNTY**
PAHOKEE
FIRST COMMUNITY BANK OF PALM BEACH COUNTY
(PAHOKEE) WAS MERGED WITH AND INTO FIDELITY
FEDERAL BANK & TRUST (WEST PALM BEACH).

LIBERTY NATIONAL BANK
LONGWOOD
LIBERTY NATIONAL BANK HAS CHANGED ITS NAME
TO ORLANDO NATIONAL BANK.

UNION BANK OF FLORIDA
SUNRISE
UNION BANK OF FLORIDA (SUNRISE) WAS MERGED
WITH AND INTO COLONIAL BANK, N.A.
(MONTGOMERY, ALABAMA).

NOTICE OF FILINGS

Notice is hereby given that the Office of Financial Regulation has received the following applications. Comments may be submitted to the Director, 200 East Gaines Street, Tallahassee, Florida 32399-0371, for inclusion in the official record without requesting a hearing; however, any person may request a public hearing by filing a petition with the Clerk, Legal Services Office, Office of Financial Regulation, 200 East Gaines Street, Tallahassee, Florida 32399-0379, pursuant to provisions specified in Chapter 69U-105, F.A.C. Petition must be received by the Clerk within twenty-one (21) days of publication of this notice (by 5:00 p.m., May 13, 2005:

APPLICATION WITHDRAWN

Application for a New Financial Institution
Applicant: Seaside Bank and Trust, Orlando, Florida
Withdrawn: April 6, 2005

APPLICATION AND PLAN FOR THE PURCHASE
OF CERTAIN ASSETS AND ASSUMPTION
OF CERTAIN LIABILITIES

Acquiring Entity: CNLBank, First Coast (In Organization), 10739 Deerwood Park Boulevard, Suite 100, Jacksonville, Florida
Selling Entity: CNLBank, Orlando, Florida (a branch located in Jacksonville, Florida)
Received: April 8, 2005
Office of Financial Regulation has received a request by a credit union to expand its field of membership. Specific information regarding the expansion can be found at http://www.dbf.state.fl.us/banking/cu_expansion.html.
Name and Address of Applicant: Gulf State Credit Union, Post Office Box 945110, Maitland, Florida 32794-5110
Expansion Includes: Adds one Select Employee Group
Received: April 7, 2005

Section XIII
Index to Rules Filed During Preceding Week

RULES FILED BETWEEN April 4, 2005
and April 8, 2005

Rule No.	File Date	Effective Date	Proposed Vol./No.	Amended Vol./No.
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DEPARTMENT OF LEGAL AFFAIRS
Florida Election Commission

2B-1.0025	4/4/05	4/24/05	30/48	31/10
2B-1.0027	4/4/05	4/24/05	30/48	31/10
2B-1.003	4/4/05	4/24/05	30/48	31/10
2B-1.004	4/4/05	4/24/05	30/48	31/10
2B-1.0045	4/4/05	4/24/05	30/48	31/10
2B-1.005	4/4/05	4/24/05	30/48	31/10
2B-1.0052	4/4/05	4/24/05	30/48	31/10
2B-1.0055	4/4/05	4/24/05	30/48	31/10

DEPARTMENT OF MANAGEMENT SERVICES
Division of Facilities Management

60H-9.001	4/4/05	4/24/05	30/51	31/10
60H-9.002	4/4/05	4/24/05	30/51	31/10
60H-9.003	4/4/05	4/24/05	30/51	31/10
60H-9.004	4/4/05	4/24/05	30/51	31/10
60H-9.005	4/4/05	4/24/05	30/51	31/10

Rule No.	File Date	Effective Date	Proposed Vol./No.	Amended Vol./No.
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DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

61-20.0025	4/5/05	4/25/05	30/27	31/9
61-20.508	4/5/05	4/25/05	30/45	31/9

Board of Landscape Architecture

61G10-11.006	4/6/05	4/26/05	31/8	
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DEPARTMENT OF ENVIRONMENTAL PROTECTION

62-345.100	4/7/05	4/27/05	31/5	
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DEPARTMENT OF HEALTH

Division of Medical Quality Assurance Boards

64B-10.001	4/4/05	4/24/05	31/7	
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Board of Chiropractic

64B2-18.002	4/5/05	4/25/05	31/9	
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