Section III Notices of Changes, Corrections and Withdrawals

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

South Florida Water Management District

RULE NOS.:	RULE TITLES:
40E-7.669	Definitions
40E-7.670	Competitive Solicitation Preferences
40E-7.672	Compliance
40E-7.673	Certification Eligibility
40E-7.674	Certification Review Procedures
40E-7.675	Recertification Review Procedures
	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. 32, No. 8, February 24, 2006, issue of the Florida Administrative Weekly. The Notice of Change is in response to both the Joint Administrative Procedures Committee's Comments and Public Comment received at our April 12, 2006 Governing Board Meeting. In addition, to the Notice of Change are the forms that will be incorporated by reference. Form No. 0956, "SBE Subcontractor Participation Schedule", which is used at the time of submittal of a bid or proposal. The bidder or proposer shall identify all SBE firms which will be utilized as subcontractors. Form No. 0957, "Statement of Intent to Perform as a SBE Subcontractor", which is used in all bids or proposals with SBE participation. The SBE subcontractor and the bidder or proposer shall document their intent to establish a business relationship and confirm the SBE participation percentages. Also included are the "Small Business Enterprise Application for Certification Form 1231" and the "Small Business Enterprise Application for Recertification Form 1232" which will also be incorporated by reference.

- 40E-7.669 Definitions.
- (1) through (3) No change.
- (4) "Employees" means those individuals who received a W-2 from the Applicant. In determining number of employees a business has, the District shall count only those individuals who were supplied a W-2 by the Applicant. Whether employed on a full-time or part-time basis.

- (4)(5) "Gross Receipts" means the total sales for the Applicant as specified in its Federal tax return or if a new company which has not filed a Federal tax returns, in its audited financial statement as referred to in paragraph 40E-7.673(2)(a), F.A.C., before deductions for returned items, allowances, and discounts.
- (5)(6) "Industry Categories" means construction, commodities and services.
- (6) "Prime Contractor" means any individual or contracting entity with whom the District has entered into a legally binding agreement for performance or work at a mutually agreed upon price in accordance with agreed upon terms and conditions.
 - (7) through (8) No change.
- (9) "District Small Business Enterprise (SBE)" means a business certified by the District, that including affiliates, employs 100 or fewer part and/or full time employees. whose three (3) year average gross receipts including affiliates shall not exceed \$13 million if the business provides construction, \$5 million if the business provides commodities, and \$6 million if the business provides services. Additionally, a District Small Business Enterprise is licensed to do business in the State of Florida if the business requires a license. Finally, a District Small Business Enterprise three (3) year average gross receipts shall not exceed \$4 million if the business provides construction, \$2.5 million if the business provides commodities, and \$3 million if the business provides services.

Specific Authority 373.044, 373.113 FS. Law Implemented 373.1135 FS. History-New_

40E-7.670 Competitive Solicitation Preferences.

- (1) No change.
- (2) Sheltered Market Program.

The District shall may provide for sheltered markets for only SBE's to bid on designated solicitations. The District shall be guided in selecting sheltered market solicitations by selecting industries in which small businesses have usually not had an opportunity to compete for awards against larger businesses. Additionally in order to award a contract in a sheltered market the District must receive responses from at least 3 SBE's. If no bid or response is received for a contract that has been designated for the Sheltered Market, the contract shall be competed pursuant to the District's Procurement Policy.

- (3) Subcontracting Requirements.
- (a) Bids The District shall set subcontracting goals for all bids based on availability in the amount of 30% of the total eontract amount. Availability refers to registered vendors with the District, including certified Small Business Enterprise (SBE) firms able to perform work within specific commodity codes. The formula for setting a goal is expressed as the total number of District certified (SBE) firms within specific commodity codes in a scope of work divided by the total number of registered vendors with the District's Procurement

Department within the same commodity codes at the time of the preparation of the solicitation. Numerically, this is expressed as:

<u>Total Number of District Certified SBE's</u> =Subcontracting Goal Percentage <u>Total Number of District Registered Vendors</u>

The maximum goal that will be applied to any solicitation will be 25%. Bidders may provide work to one or more District SBE's in order to meet the goal. Any bidder failing to meet the established 30% goal shall be deemed nonresponsive.

(b) Proposals – For contracts awarded based on an evaluation criteria, up to 20 of the total evaluation points may be awarded to Prime contractors who subcontract 30% or more of the contract dollar amount to certified SBE's. the District shall award points as reflected in Table 7.6-2. The maximum points will be awarded to the proposer if 25% or more of the total project work is performed by SBE firms. Percentages reflect the amount of the total contract value proposed to be assigned to SBE firms.

TABLE 7.6-2 EVALUATION POINT TABLE

10 20 POINTS FOR SBE PARTICIPATION						
≥ <u>25</u> 30 % =	<u>10</u> 20 points					
$\geq 237\% =$	<u>9</u> 18 points					
≥ 2 <u>1</u> 4% =	<u>8</u> 16 points					
≥ <u>19</u> 21 % =	<u>7</u> 14 points					
≥ <u>17</u> 18 % =	6 12 points					
≥ 15% =	<u>5</u> 10 points					
$\geq 13 \frac{2\%}{} =$	4 8 points					
≥ <u>11</u> 9 % =	<u>3</u> 6 points					
≥ <u>9</u> 6 % =	<u>2</u> 4 points					
≥ <u>7</u> 3 % =	<u>1</u> 2 points					

(e) Failure to submit any of the documentation required herein shall lead to the business submitting a bid or proposal being deemed nonresponsive.

(c)(d) At the time of submittal of its bid or proposal the bidder or proposer prime contractor using shall identify all SBE firms which will be utilized as subcontractors, by using Form No. 0956, "SBE Subcontractor Participation Schedule" effective (), which is hereby incorporated by reference and which can be obtained from the District upon request on the contract. All bids or proposals with SBE participation shall include Form No. 0957, "Statement of Intent to Perform as a SBE Subcontractor" effective (), which is hereby incorporated by reference and can be obtained from the District upon request, signed by the SBE subcontractor and the bidder

or proposer which confirms their intent to establish a business relationship and confirms the SBE participation percentages. The proof of certification for all SBE's must be submitted to the District at the time of bid or proposal. Failure to submit any of the information required herein shall lead to the bid or proposal being deemed nonresponsive. Additionally the prime contractor must specify what specify work elements each SBE will perform. All prime contractors must submit proof of District certification of the SBEs they plan on using in the bid or proposal by providing a copy of the District certification letter. All SBE proposed tasks must be defined within the scope of work being solicited by completing these two forms: the Schedule of Subcontractor Participation Form and Statement of Intent to Perform as a Subcontractor Form.

Specific Authority 373.044, 373.113 FS. Law Implemented 373.1135 FS. History-New

40E-7.672 Compliance.

- (1) through (3) No change.
- (4) To ensure that all commitments by prime contractors under contracts awarded in which there are SBE subcontractors are met, the prime contractor's efforts to meet its commitments throughout the performance of the contract shall be reviewed. The Prime Ceontractor shall advise the District of any situation in which regularly scheduled progress payments are not made to SBE subcontractors.
 - (5) through (6) No change.

Specific Authority 373.044, 373.113 FS. Law Implemented 373.1135 FS. History–New______.

40E-7.673 Certification Eligibility – Small Business Enterprise.

District staff shall have the authority to accept, review, approve, certify, decertify and deny applications for SBE certification. An applicant business must be registered with the District as a vendor prior to submitting an application for certification.

- (1) Applicant businesses shall submit applications for SBE certification using Form No. 1231, "SBE Certification Application" effective (____), which is hereby incorporated by reference and which can be obtained from the District upon request. Mailing addresses must include the number, name of the street, suite number, if any, city and correct zip code. A post office box will not be acceptable absent a street address.
- (2) To establish that it is a small business, the applicant shall:
- (a) Provide documentation to demonstrate that the three (3) year average gross receipts of the business concern, together with its affiliates, does not exceed \$134 million for Construction, \$52.5 million for Commodities, and \$63 million for Services. In determining the gross receipts of the business and its affiliates, the District shall consider the three (3) most recent federal tax returns, filed by the Applicant for the three

- (3) years immediately preceding their application. or Lift the Applicant business has not filed three (3) federal income tax returns for the three (3) years immediately preceding their application, the most recent audited financial statements for the business shall be considered. then the Applicant must submit a financial statement, for any of the three (3) years immediately preceding the application in which the Applicant did not file a federal income tax return(s). The financial statement must be prepared by a Certified Public Accountant as defined by Section 473.301, F.S., not employed by the Applicant but retained for the purpose of preparing financial statements for the Applicant. Applicants in business less than one (1) year are to submit an opening balance sheet and income statement for the months in which they were in business.
- (b) Provide documentation to demonstrate that it employs one hundred (100) or fewer Employees. In determining whether the applicant meets the criteria for a small business, the District shall consider the following documentation:
 - 1. Latest Florida Quarterly Unemployment Reports.
 - 2. Annual Federal Unemployment Report.
 - 3. Most Current Payroll Ledgers.
- (b)ii. The applicant must demonstrate that it is licensed to do business in the State of Florida if the business requires a
- (c) The Applicant may only have one (1) business certified with the South Florida Water Management District.

Specific Authority 373.044, 373.113 FS. Law Implemented 373.1135 FS. History–New

40E-7.674 Certification Review Procedures.

- (1) No change.
- (2) Within thirty sixty (360) days following receipt of the application, the District will request the applicant business to furnish omitted items or additional information, if any. If all requested information is not received by the District within thirty (30) days from the date of the request, the District will return the unprocessed application to the applicant business.
- (3) An on-site verification review may be conducted by the District upon receipt of the completed application. Failure to cooperate with the scheduling of the on-site review or during the on-site review shall result in the denial of the application.
- (3)(4) Applicants determined eligible shall receive certification as an SBE from District staff. This document will state the length of time for which the business will be certified and the areas of business it is certified in. Once certified, an applicant shall remain certified for a period of three (3) years unless the applicant fails to follow this rule and is sanctioned pursuant to the Rule. The District retains the right to re-evaluate the certification of any business at any time.

(4)(5) Applicants determined ineligible shall receive a notification from District staff. Applicants receiving this notification of ineligibility shall not be eligible to submit new applications until 180 days after the date of the notice denying certification.

Specific Authority 373.044, 373.113 FS. Law Implemented 373.1135 FS. History–New

40E-7.675 Recertification Review Procedures.

- (1) Applications for recertification shall be submitted using Form No., 1232 "SBE Application for Recertification", effective () which is hereby incorporated by reference and available from the District upon request.
- (2) The District will notify SBEs no later than sixty (60) days before the end of the certification period that the SBE's certification is about to expire. If the SBE is unable to use the recertification document because of changes to the applicant's business, the SBE shall notify the District in writing of the changes to its company. The District shall determine if the company still complies with the certification criteria set forth in Rule 40E-7.673, F.A.C. Recertification requests must be filed with the District no later than the last effective date of the current certification period.
- (3) Upon receipt, all recertification requests shall be given an initial screening to ensure appropriate signature and completeness. Within thirty sixty (360) days following initial receipt of the applicant's recertification request, the District will may request the applicant to furnish omitted or additional information. If the requested information or items are not received by the District within thirty (30) days from the date of the request, the District will deny the application for recertification.
- (4) An on site verification review may be conducted by the District upon receipt and review of the recertification request. Failure to cooperate with the scheduling of the on site review or during the on site review shall result in the denial of recertification.
- (4)(5) Recertification shall be granted when the applicant has complied with this rule and substantiates continued eligibility for SBE status.
- (5)(6) Applicants deemed eligible shall receive a recertification letter stating the length of time for which the business has been re-certified and the specialty areas of the business. Once recertified, an applicant shall remain certified for a period of three (3) years unless the District determines that the applicant no longer meets the eligibility requirement of this Rule. The District retains the right to reevaluate the certification of any business at any time.
- (6)(7) Applicants determined ineligible for recertification shall receive a letter citing the specific criteria of Rule 40E-7.673(2), F.A.C., that they failed to meet and advising that

they applicable rules and shall not be eligible to submit new applications until 180 days after the date of the notice or the District's final agency order denying recertification.

(7)(8) If an application for recertification is timely submitted, an SBE shall remain certified until the District has made a determination concerning eligibility.

Specific Authority 373.044, 373.113 FS. Law Implemented 373.1135 FS. History–New

AGENCY FOR HEALTH CARE ADMINISTRATION Division Health Quality Assurance

RULE CHAPTER NO.:	RULE CHAPTER TITLE:				
59A-33	Health Care Clinic Licensure				
RULE NOS.:	RULE TITLES:				
59A-33.001	Definitions				
59A-33.002	Licensure, Application Process,				
	General Requirements				
59A-33.003	Initial License Applications				
	Applicability				
59A-33.004	Renewal License Application				
59A-33.005	Change of Ownership License				
	Applications				
59A-33.006	Certificates of Exemption and				
	Exempt Status				
59A-33.007	AHCA Forms Availability,				
	Information and Website				
59A-33.008	Medical and Clinic Director				
59A-33.009	Financial Instability				
59A-33.010	Cessation of Business, Billing and				
	Medical Records Retention,				
	Suspended and Revoked Licenses				
59A-33.011	Magnetic Resonance Imaging				
	Exemption for Chief Financial				
	Officer				
59A-33.012	Survey Requirements and Process				
59A-33.013	Medical and Clinic Directorships				
	Maximum Number of Clinics				
NOT	TICE OF CHANGE				

Notice is hereby given that the following coded changes (strike and add) have been made to proposed Rule Chapter 59A-33, F.A.C., in accordance with subparagraph Section 120.54(3)d)1., Florida Statutes, originally published on January 13, 2006 in Vol. 32, No. 2, Florida Administrative Weekly.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE CHANGES IS: Roger Bell, Unit Manager of the Health Care Clinic Unit, 2727 Mahan Drive, Mail Stop #53, Tallahassee, Florida 32308-5704, (850)488-1365, Suncom 278-1365, e-mail: bellr@ahca.myflorida.com

THE FULL TEXT OF THE PROPOSED RULE WITH CODED CHANGES IS:

59A-33.001 Definitions.

In addition to definitions contained in Chapter 400, Part XIII, F.S., the following definitions shall apply specifically to health care clinics.

- (1) "Licensee" means an individual, general partner of a limited partnership, general partnership, joint venture, limited liability company, limited liability partnership, unincorporated association, corporation or any other business relationship or entity that owns or controls a health care clinic or is the lessee of the health care clinic having the right of possession of the health care clinic location or mobile unit.
- (2) "Physician" means a person currently licensed to practice medicine, osteopathy, chiropractic, or podiatry pursuant to Chapter 458, 459, 460 or 461, F.S., respectively.
- (3) "Unencumbered license" means a license issued by the respective health practitioner board of the Department of Health that permits a physician to perform all duties authorized under a license without restriction.
- (4) "The Health Care Clinic Act" or "Act" means Part XIII, Chapter 400, F.S.
 - (5) "F.S." means Florida Statutes.
 - (6) "F.A.C." means Florida Administrative Code.
- (7) "Licensed medical provider" means a licensed health care practitioner.

Specific Authority 400.9925 FS. Law Implemented 400.991(1), 400.9925, 400.9905(4)(g), (5) FS. History–New

59A-33.002 Licensure, Application Process, General Requirements.

(1) The licensee or prospective licensee shall make application for an initial, change of ownership, or renewal license to operate a health care clinic and shall provide all of the information required by this rule and Chapter 400, Part XIII, F.S. on AHCA Form 3110-0013B, Application for Health Care Clinic Licensure June 2004, and AHCA Form 3110-0013A, Instruction for Completing the Application for Health Care Clinic Licensure June 2004 incorporated by reference.

The following shall be included with the application:

- (a) License Fee. A nonrefundable \$2,000 application fee payable to AHCA; and
- (b) Fictitious Name. When an applicant intends to operate under a fictitious name, a copy of an Affidavit of Compliance with Fictitious Name pursuant to Section 865.09, F.S., or a copy of a registration form from the Division of Corporations, Secretary of State, showing registration of the applicant's fictitious name; and
- (c) Evidence of Incorporation. When an applicant is a corporation or other entity, a copy of the registration of the applicant entity on file with the Division of Corporations, Secretary of State, State of Florida; and

- (d) Financial Projections. Proof of financial ability to operate for the first year of licensure. This proof shall include evidence that the applicant has sufficient assets, credit, and projected revenues to cover liabilities and expenses. The applicant must submit a projected income and expense statement and projected balance sheet that have been prepared according to generally accepted accounting principals and signed by a certified public accountant. As a convenience, the applicant may submit the required information on AHCA Form 3110-001C, June 2005, Schedule 2, Projected Income and Expense, incorporated by reference, and AHCA Form 3110-001D, Schedule 3, Projected Balance Sheet, June 2005, incorporated by reference. As an alternative, and not in addition to providing a projected income and expense statement and projected balance sheet, the applicant may submit a surety bond in the amount of \$500,000 payable to the Agency for Health Care Administration. For a Surety Bond the applicant must submit AHCA Form 3110-1103E, Health Care Clinic Surety Bond, June 2005, incorporated by reference; and
- (e) Background Screening. All information required by this paragraph (e) to enable the Agency to evaluate and determine compliance with the Act regarding background screening. This information must include the identification of all individuals who must be the subject of Level 2 background screening under standards established in Chapter 435, F.S., and in Section 400.991(7)(d), F.S., as required on AHCA Form 3110-0013B, June 2005, Application for Health Care Clinic Licensure, adopted by reference.
- 1. Individuals required to meet background screening requirements include individuals owning or controlling, directly or indirectly, 5 10% or more of an ownership interest in the health care clinic; the medical or clinic director, or similarly titled person responsible for the day to day operation of the health care clinic; the financial officer or similarly titled individual responsible for the financial operation of the health care clinic, and all licensed health care practitioners employed by or under contract to the health care clinic that have been issued a license, registration or certification by the Florida Department of Health.
- 2. For each individual not previously screened within the last 5 years, who passed background screening in accordance with the Act in such previous background screening, the applicant for licensure shall submit an original completed applicant (meaning that individual) fingerprint card (blue and white card) from any authorized agency or law enforcement office in the United States plus the applicable processing fee established by the Florida Department of Law Enforcement (FDLE); provided however, an individual who owns an interest in a health care clinic, where but such ownership interest is less than a 10% interest, shall may not be required to submit a fingerprint card. This latter proviso shall not preclude the Agency from determining through means other than through

- the examination of fingerprints, whether any such individual has a criminal record that precludes issuance of a health care clinic license to the applicant for licensure.
- 3. Within thirty (30) days of Upon receipt by the Agency of the results of background Level 2 screening by FDLE and by the Federal Bureau of Investigation (FBI), the Agency will notify the applicant in writing if the determination is other than compliant ("HCC-OK"). Within twenty-one (21) days of such notice by the Agency to the licensure applicant, with the Agency's accompanying request for additional information, <u>t</u>The applicant shall provide the following additional information to the Agency as requested within 30 days of the notice to enable the Agency to make a final determination regarding whether a disqualifying criminal record exists for any such individual that would preclude issuance of the license to the applicant. The Agency will notify the applicant for the license in writing of a final disqualifying criminal record and the right to formally contest the determination.
- 4. Any applicant that fails to provide requested criminal or other necessary information within twenty-one (21) thirty (30) days after the notice to the applicant of the need for such information regarding any particular individual, or that otherwise fails to respond to the notice in a manner that resolves the problem in determining the disqualifying nature of the criminal record of a particular individual, shall be subject to having the applicant's pending license application withdrawn to denial or revocation of an existing license revoked for such failure.
- 5. Individuals directly or indirectly owning or controlling 5 10% or more of an interest in a health care clinic means the natural persons owning or controlling stock, directly or indirectly, in the applicant entity or owning or controlling 5 10% or more interest in a company or companies directly or indirectly related to the applicant entity through inter-company ownership or control. For example: When a parent company or companies own 100% of the outstanding stock or controls the applicant entity, any individual owning or controlling a 5 10% or more interest in the parent company is required to undergo Level 2 background screening in accordance with the Act.
- 6. Any individual employed by or under contract with a health care clinic who is required to pass Level 2 background screening must submit an applicant fingerprint card and processing fee of \$47 to the Agency within 10 days of becoming affiliated with a health care clinic in accordance with paragraph (1)(e), unless submitted with an initial, change of ownership or renewal application. This requirement shall be a continuous obligation of the healthcare clinic. All applicants for a license or current licensees must comply in a timely manner. For persons who have previously completed and met Level 2 background screening requirements and for such other persons subject to background screening, the health care clinic must file a supplemental application on AHCA Form

3110-0013B, June 2005, Application for Health Care Clinic Licensure, incorporated by reference, by following the instructions for meeting background screening requirements when adding personnel to the health care clinic. Failure of the health care clinic to submit fingerprint cards and related fees in a timely manner as required by this paragraph shall subject the health care clinic to the penalties of Section 400.995 (1), F.S.

- 6.7. No license will be issued to any health care clinic until all of the required background screening responses from FDLE the Florida Department of Law Enforcement and from the FBI have been received by the Agency and the individuals screened have been determined cleared in accordance with the Act and consistent with this rule. Documentation that resolves background screening issues is required documentation pursuant to Section 400.991(4), F.S. A license that is granted, notwithstanding the existence of a pending criminal charge against an individual whose criminal case will not be resolved within the time specified in this rule, and which criminal charge may result in the establishment of a criminal record that would have precluded licensure if established prior to issuance of the license, shall be subject to periodic review by the Agency specifically as to the disposition of that individual's criminal charge. The licensee promptly shall promptly notify the Agency of such disposition upon learning of it.
- (2) All health care clinics deemed to be unlicensed under this rule are specifically subject to a fine for unlicensed activity in accordance with Section 400.995(5), F.S. and all other remedies provided by law. The Agency may deny, suspend, revoke and refuse to renew a license or application for any reason set forth in Section 408.831, F.S. In the event the Agency denies an application for renewal and seeks sanctions, the Agency shall issue a provisional license that shall enable the health care clinic to operate during the sanction proceedings. The provisional license shall terminate on the date the license is revoked by final order, the date the sanctioning proceeding terminates, or the date the final order grants the health care clinic a standard license.
- (2)(3) All forms and these rules may be obtained by contacting the Agency as shown in Rule 59A-33.007, F.A.C.

Specific Authority 400.991(1), 400.991(7)(d), 400.995(3), 400.9925 FS. Law Implemented 400.9925, 400.991(1)(a), (4), (7)(d), 435.04 FS. History–New ______.

59A-33.003 Initial License Applications Applicability.

- (1) Licensure is required for all entities meeting the definition of "Health eare clinic" per Section 400.9905(4), F.S., that are not otherwise exempt under Section 400.9905(4)(a)-(j)(i), F.S.
- (2) Any business that meets the definition of a health care clinic must submit an application in accordance with Rule 59A-33.002, F.A.C., within 5 days of becoming a health care clinic pursuant to Section 400.9935(2), F.S. An application for licensure is required for health care clinics that have a current

certificate of exemption or have self-determined they have exempt status, but do <u>not</u> qualify for an exemption under Section 400.9905 (4), F.S.

(3) A change of ownership application that is not received before the ownership change has been completed is considered an initial license application.

Special Provisions. Submission of applications must be in accordance with Rule 59A-33.002, F.A.C., General Provisions.

Specific Authority 400.9925 FS. Law Implemented 400.991, 400.992, 400.9935(9) FS. History–New

59A-33.004 Renewal License Applications.

- (1) At least 90 days prior to the expiration of the license, all licensed health care clinics must submit a complete renewal application on AHCA Form 3110-0013B, Application for Health Care Clinic Licensure June 2005, in accordance with AHCA Form 3110-0013A, Instruction for Completing the Application for Health Care Clinic Licensure June 2005 and check the renewal box. These forms are hereby adopted by reference. All information required by the form and instructions must be submitted. All forms and these rules may be obtained by contacting the Agency in accordance with Rule 59A-33.007, F.A.C.
- (2) Timeliness of the renewal application will be determined on the basis of receipt by the Agency. In the event an application is submitted less than 90 days before license expiration, an administrative fine of one half of the license fee shall be assessed. An application for renewal submitted to the Agency after the expiration date will be processed as an initial application.
- (3) A health care clinic is deemed to be unlicensed after the license has expired. The health care clinic is then subject to a fine for unlicensed operation in accordance with Section 400.995(5), F.S.
- (2)(4) Special Provisions. Submission of the renewal application must be in accordance with Rule 59A-33.002, F.A.C. Proof of financial ability to operate shall not be required for a renewal application unless the Agency determines that there is evidence of financial instability. If the Agency and notifies the health care clinic in writing of such evidence of instability, the clinic will be required to demonstrate proof of financial ability to operate in order to meet the licensure requirements of the Act comply with. (See Rule 59A-33.009, F.A.C., relating to financial instability).
- (3)(5) An unannounced onsite inspection and survey will be conducted by the Agency prior to license expiration. All requirements for licensure under these rules and the Act must be met during the survey.
- (4)(6) Each health care clinic providing magnetic resonance imaging services must provide proof of required accreditation under Section 400.9935(9), F.S., with the license

renewal application. This requirement is met with a copy of a letter or certificate indicating the effective date of the accreditation.

Specific Authority 400.9925 FS. Law Implemented 400.991(4), (8), (9), 400.991(1) 400.9935(5), (11)(a), 400.995(1), (5) FS. History-

59A-33.005 Change of Ownership License Applications.

- (1) Applications for change ("CHOW") of health care clinic ownership are subject to the following standards.
- (a) A health care clinic license cannot be sold, assigned. encumbered, pledged as security, leased or otherwise transferred, directly or indirectly. A health care clinic license is good only for the location and owners originally approved by the Agency.
- (b) An application for change of ownership of a health care clinic is required pursuant to Section 400.992(4), F.S., when 45 percent or more of the ownership, voting shares, or controlling interest of a health care clinic is transferred or assigned, or when the maximum aggregate percentage is achieved cumulatively within a 2-year period. The standards and applications under Rule 59A-33.002, F.A.C., shall apply to applications for change of ownership.
- (c) When such a changeing the of ownership of a health care clinic occurs or is contemplated to occur as described in paragraph (b), an application for change of ownership must be submitted to the Agency at least 60 days before the effective date of the change. A change of ownership prior to submitting this required application in a timely manner and operation as a health care cline is considered operating in violation of the Act and the clinic shall be fined \$5,000 in accordance with Section 400.995, F.S.
- (d) When changing the ownership of a health care clinic, the transferee must submit an application for a license and check the change of ownership box on AHCA Form 3110-0013B, June 2005, Application for Health Care Clinic Licensure with accompanying instructions. This form is adopted herein by reference. The form and these rules may be obtained by contacting the Agency in accordance with Rule 59A-33.007, F.A.C.
- (e) When a health care clinic changes ownership according to the criteria set forth in this rule and the Act and operates before an change of ownership application is filed, it is in violation of Section 400.993(1), F.S., and the Agency shall issue a notice of intent to assess the assess a statutory fine of \$5,000.
- (f)(e) When a health care clinic changes ownership and operates after an application is filed, but before the new change-of-ownership license is effective, the Agency shall issue a notice of intent to fine assess the applicant a fine of up to \$5,000 pursuant to Section 400.995(1), F.S.

(g)(f) A change of ownership application requires compliance with Rule 59A-33.002, F.A.C., which includes, but is not limited to, the licensure applicant's submission of proof of financial ability to operate and of applicant fingerprint cards for all persons required to meet to submit to comply with level 2 background screening requirements within the past 5 years in accordance with AHCA Form 3110-0013B, June 2005, titled Application for Health Care Clinic Licensure.

Specific Authority 400.9925 FS. Law Implemented 400.991(7)(d), 400.992(4)-(5), 400.9925(1)-(5), 400.993(2), 400.995(1), (6), (7) FS. History-New _

59A-33.006 Certificates of Exemption and Exempt Status.

- (1) Facilities and entities exempt from health care clinic license requirements are set forth in Section 400.9905(4), F.S. A facility is not required to have, but may voluntarily apply for a certificate of exemption.
- (2) Facilities that claim an exemption, either by filing an application for an certificate of exemption with the Agency and receiving a certificate of exemption, or self-determining, must maintain an exempt status at all times the facility is in operation.
- (3) When a change to the exempt status occurs to an exempt facility or entity that causes it to no longer qualify for an exemption, any exempt status claimed or reflected in a certificate of exemption ceases on the date the facility or entity no longer qualifies for a certificate of exemption becomes a health care clinic. In such case, the health care clinic must file with the Agency a license application under the Act within 5 days of becoming a health care clinic and shall be subject to all provisions of the Act applicable to unlicensed health care clinics. Failure to timely file an application for licensure within 5 days of becoming a health care clinic will render the health care clinic unlicensed and subject the owners, medical or clinic directors and the health care clinic to sanctions under the Act.
- (4) A facility becomes a health care "clinic" as defined in Section 400.9905(4), F.S., when it does not qualify for an exemption, provides healthcare services to individuals and bills third party payers for those services.
- (5) Change of Exempt Status. When exempt status changes are discovered, the Agency will notify a facility or entity applying for, obtaining or self-determining exempt status, that the exempt status is no longer valid, giving the grounds therefore, the date of the change, when known, and the statutory and rule provisions applicable. The Agency shall give the facility or entity notice of unlawful health care clinic operation, the statutory and rule requirements of becoming a health care clinic and sanctions for operating without a valid license for the owners, medical or clinic directors and the location. The Agency shall also provide information to the facility or entity believed to be operating without exempt status of the licensing procedures and the Agency filings necessary to meet licensure requirements.

- (6) The applicant for a certificate of exemption must affirm, without reservation, the exemption sought pursuant to Section 400.9905(4), F.S., and the qualifying requirements for obtaining and maintaining an exempt status; the current existence of applicable exemption-qualifying health care practitioner licenses; qualified ownership, qualified certifications or registration of the facility or owners; federal employer identification number; services provided; proof of legal existence and fictitious name, when the entity and name are required to be filed with the Division of Corporations, Department of State; plus other satisfactory proof required by form adopted by this rule.
- (7) The fee for issuance of a certificate of exemption shall be \$100 and submitted to the Agency with the application.
- (8) Within 30 calendar days after application receipt, the Agency shall determine whether the application is complete. If the application is deemed incomplete, the Agency shall request in writing from the applicant specific information necessary for the application to be deemed complete. Only one such request will be made by the Agency. If the applicant does not provide the specific additional information required by the statute and rule in writing to the Agency within 21 calendar days of receipt of the Agency's request, the application will be deemed incomplete and the certificate of exemption shall be withdrawn from further consideration denied. The applicant's response must be received by the Agency no later than 5:00 P.M., E.S.T., on or before the omissions due date. An application for a certificate of exemption from health care clinic licensure shall be granted or denied by the Agency within 90 days of receipt of a fully completed application on AHCA Form 3110-0014, which is incorporated by reference and may be obtained in accordance with Rule 59A-33.007, F.A.C.
- (9) The Agency shall may rely upon the address given on the application as the official address to which correspondence may be sent. It is the duty of the applicant to notify the Agency in writing at least 10 days in advance of any change of the current mailing address by contacting the Agency according to Rule 59A-33.007, F.A.C.
- (10) Certificates of exemption are not moveable or transferable, directly or indirectly. They are valid only for the applicant, qualifying owners, licenses, registrations, certifications and services provided under specific statutory exemptions and are valid only to the specific exemption claimed and granted. In order for a certificate of exemption to be valid the applicant must apply for and receive a new certificate of exemption for changes of location and any qualifying statutory or rule requirement of an exemption.

Specific Authority 400.9925 FS. Law Implemented 400.9905(4), 400.9935(2), (9) FS. History–New _____.

59A-33.007 AHCA Forms Availability, Information and Website.

All forms and corresponding instructions, copies of these rules, the Health Care Clinic Act and other information necessary for licensure and exemption that are incorporated by reference into this chapter, F.A.C., may be obtained from the Health Care Clinic Unit website: http://www.fdhc.state.fl.us/MCHQ/Health_Facility_Regulation/HealthCareClinic/index.shtml or may be obtained by written request addressed to: AHCA, Health Care Clinic Unit, 2727 Mahan Drive, MS #53, Tallahassee, FL 32308 or by telephone at (850)488-1365 for mailing or inquiry.

Specific Authority 400.9925 FS. Law Implemented 120.54 FS. History–New ______.

59A-33.008 Medical or Clinic Director.

- (1) A licensed health care clinic may not operate or be maintained without the day-to-day supervision of a single medical or clinic director as defined in Section 400.9905(5), F.S. The health care clinic responsibilities under Section 400.9935(1)(a)-(g), F.S., cannot be met without an active, appointed medical or clinic director. Failure of an appointed medical or clinic director to substantially comply with health care clinic responsibilities under Rule 59A-33.012, F.A.C., and Sections 400.9935(1)(a)-(g), F.S., shall be grounds for the revocation or suspension of the license and assessment of a fine pursuant to Section 400.995(1), F.S.
- (2) By statutory definition in Section 400.9905(5), F.S., a medical director is a health care practitioner that holds an active and unencumbered Florida physician's license in accordance with Chapters 458 (medical physician), 459 (osteopathic physician), 460 (chiropractic physician) or 461 (podiatric physician), F.S. A suspended or non-renewed license is considered an encumbered license, as is a license that restricts the license holder from performing health care services in a manner or under supervision different from a license holder without board or Department of Health restrictions.
- (3) The Agency shall may issue an emergency order suspending the license of any health care clinic operated or maintained without a medical or clinic director as required by the Act and this rule for such period of time as the health care clinic is without a medical or clinic director. The Agency shall assess a civil fine of up to \$5,000 for operating or maintaining a health care clinic without a medical or clinic director. Each day of operation following receipt of Agency notice is considered a separate offense. Operation and maintenance of a health care clinic without a medical or clinic director shall be grounds for revocation of the license in addition to the assessment of fines pursuant to Section 400.995(1), F.S.
- (4) All health care clinics must notify the Agency of the resignation, abandonment and appointment of a medical or clinic director on AHCA Form AHCA Form 3110-0014 June

05, which is adopted by reference, by delivering the original form to the Agency at the address set forth in Rule 59A-33.007, F.A.C. Such application must be filed with the Agency within 10 days of the resignation or abandonment of a medical or clinic director. The health care clinic must also file an application with the Agency within 10 days of the appointment of a new medical or clinic director. The form shall require the date the medical or clinic director of record ceased to be the director and the date the successor began as director. The incoming medical or clinic director and a representative of the owner of the health care clinic shall sign the form and attest to its accuracy. The form shall include an acknowledgement that the new medical or clinic director has accepted the responsibilities of Section 400.9935(1), F.S., by signing the form. A copy of the form may be obtained from the Agency at the address shown in Rule 59A-33.007, F.A.C. All appointed medical or clinic directors must comply with Section 400.9905(5), F.S., at the time of appointment and throughout the appointment period. There is no fee for this form.

(4) Unless otherwise exempted by law, an application for a change in the medical or clinic director The shall be accompanied by a fingerprint card of the new medical or clinic director together with the required and a processing fee for background screening of that individual of \$47 per card.

Specific Authority 400.9925(1), (2) FS. Law Implemented 120.542, 120.60(6), 400.9905(5), 400.9915(3), 400.993, 400.9935(1)(a)-(g), 400.9935(3), 400.995(1), (6) FS. History-New _

59A-33.009 Financial Instability.

When evidence of financial instability of a health care clinic is substantiated, the Agency will notify the health care clinic in writing that satisfactory proof of financial ability to comply with Part XIII, Ch. 400, F.S., must be provided.

- (1) Evidence of financial instability of a health care clinic shall, without limitation, include issuance of checks and drafts for which there are insufficient funds, an accumulation of delinquent bills for such items as personnel salaries, drugs, lease, mortgage, utilities or other operational costs, appointment of a receiver, a voluntary or involuntary petition for bankruptcy, a voluntary arrangement with creditors, health care clinic closure, discontinuance of health care clinic business for more than 60 consecutive days or insolvency.
- (2) The licensee shall submit to the Agency a written plan of correction to resolve specific financial problems that the Agency has identified as evidence of financial instability. Should the financial instability not be resolved within 90 days of the original notice, the licensee shall be subject to disciplinary action, fine, suspension or revocation of the license.

Specific Authority 400.9925 FS. Law Implemented 400.992(3) FS. History-New

- 59A-33.010 Cessation of Business, Billing and Medical Records Retention, Suspended and Revoked Licenses.
- (1) The medical or clinic director serves as the medical records owner while the health care clinic is in operation. After The licensee is the records owner of billing and medical records after the cessation or change of ownership of the business,- tThe treating health care practitioner creating the record is the medical records owner in accordance with Sections 456.057, 456.0575, 456.58, F.S., and the rules promulgated thereunder unless there is a written agreement between the practitioner and health care clinic to the contrary.
- (2) Each original license shall be returned to the Agency at the address shown in Rule 59A-33-007, F.A.C., within 10 days after a change of ownership in accordance with Rule 59A-33.005, F.A.C., or cessation of operations, suspension or revocation of the license by the Agency. Agency staff shall may enter the premises of the health care clinic at reasonable times to remove a license after final action of the Agency suspending or revoking the license or when the health care clinic has changed ownership in accordance with Rule 59A-33.005, F.A.C., or relocated without notice to the agency. Operating a health care clinic while a license is suspended or revoked constitutes shall be deemed unlicensed operation of a clinic and subjects the clinic, owners and medical or clinic director, individulally, to the criminal sanctions, and the clinic to per-day fines for operating without a license.
- (3) All financial books and medical records, including but not limited to, patient files and billing records, shall be retained by the health care clinic owners in a secure location for a period of at least five (5) years from the last date on the record. The licensee shall notify the Agency in writing within 10 days of closure giving the Agency the name, street address and telephone number of the custodian and street address of the location of financial and medical records.
- (4) When a change of ownership occurs, the new medical or clinic director will serve as the records owner in accordance with the practice act of the director. Within 10 days of any change of location or change of records custodian, the health care clinic owners shall provide to the Agency in writing, information as required by subsection (3). Records shall be retained for at least five (5) years from the last date on the record.

Specific	Authority	400.9925	FS. Law	Implemented	400.991,	400.993
400.994	, 400.995	FS. History	/–New _	·		

59A-33.011 Magnetic Resonance Imaging Exemption for Chief Financial Officer.

(1) The statutory authorization threshold to utilize a chief financial officer ("CFO") in lieu of a medical or clinic director to supervise health care clinic activities under Section 400.9935(1)(g), F.S., is partially met when less than 15% of the

total scans for the previous quarter (3 months) of operation are reimbursed from automobile personal injury protection insurance ("PIP").

- (2) Calendar quarters shall begin on the first of January, April, July and October. For health care clinics applying for and obtaining initial licenses, a partial quarter shall count as a full quarter of operations for purposes of qualifying for this CFO exemption to Section 400.9935(1)(g), F.S.
- (3) In calculating total scans, a single scan means one patient study. The records of total scans must be maintained by the health care clinic and made available to an authorized employee of the Agency upon request. The records for each quarter in which the exemption is claimed must be tallied separately and demonstrate the total number of scans billed to PIP insurance divided by the total scans for the quarter. Upon request of the Agency, the health care clinic shall demonstrate how the figures were determined and the methodology utilized.
- (4) The exemption from the required utilization of a medical or clinic director for Section 400.9935(1)(g), F.S., activities applies only to a health care clinic that is fully accredited by the Joint Commission on Accreditation of Healthcare Organizations and the American College of Radiology or dually accredited by the Accreditation Association for Ambulatory Health Care and the American College of Radiology.
- (5) Each CFO claiming qualifications for the exemption, shall within 30 days of the health care clinic meeting the threshold for the previous quarter for utilization, affirm to the Agency in writing at the address shown in Rule 59A-33.007, F.A.C., that the CFO meets the minimum qualifications for appointment, the MRI health care clinic has been appropriately accredited and the health care clinic has met the minimum scan threshold for the previous three months <u>as set forth in Section 400.9935(1)(g)</u>, F.S.
- (6) The health care clinic shall maintain the records reflecting qualification for the CFO exemption, including the individual qualifications of the person acting as the CFO as set forth in Section 400.9935(1)(g), F.S., for 3 years.
- (7) For purposes of determining whether a clinic has obtained required accreditation within one year of licensing, a temporary or provisional license is considered "licensed" within the meaning of Section 400.9935(11)(a), F.S.

Specific Authority 400.9925 FS. Law Implemented 400.9905(3), 400.9935(11)(a), (g) FS. History–New

59A-33.012 Survey Requirements and Process.

(1) The survey process is an onsite inspection and review of the health care clinic facility or administrative office, by authorized Agency employees to determine the health care clinic's compliance with the minimum standards established by the Act, its statutory references and rules regulating the operation and licensure of health care clinics. Surveys will be conducted as part of the review process for initial, renewal,

change of ownership and complaint investigations and may be unannounced. The purpose of the survey is to verify information provided on an application as well as inspect, review, interview, document and determine that the minimum health care delivery system attributes for a health care clinic, as required by the Act and these rules are in place and operational or will be operational after commencing business.

- (2) A survey will be conducted for:
- (a) Initial applications for licensure; and
- (b) Applications for renewal licenses; and
- (c) Applications for a change of ownership.
- (d) Complaints filed with the Agency.
- (3) The surveyor will request the health care clinic to demonstrate how it is meeting or will meet the minimum requirements for licensure. The medical or clinic director must attend the survey entrance conference and be available when the survey is conducted for the surveyor to determine compliance with minimum standards. Other key personnel required include the financial director, a representative of management or ownership and persons responsible for patient records and billing.
- (4) At the entrance conference, each surveyor will identify himself or herself and will discuss the survey process and what is expected of the health care clinic during the survey. At the exit conference, surveyors will inform health care clinic representatives of the findings of the survey. When deficiencies are found, the surveyor will discuss them with the persons then in attendance and discuss the criteria for determining the level of sanctions in accordance with Section 400.995(1)(a)-(d), F.S. The field office shall inform the health care clinic in writing of its recommendations and shall require a plan of correction to be prepared and delivered to the field office within 10 days of receipt to correct deficiencies when minimum health care delivery system requirements have not been met. Implementation and Agency verification of a successful plan of correction does not prohibit the field office from recommending sanctions. Sanctions shall include the assessment of fines, suspension, moratorium, emergency order of suspension and revocation.
- (5) To facilitate a licensure survey, the health care clinic shall should have the following materials readily available for review at the time of the survey: When the survey is unannounced, the materials should be made available to the surveyor upon request.
- (a) The professional license or facsimile of the license for the medical or clinic director.
- (b) Copy of medical or clinic director's written agreement with the health care clinic assuming the responsibilities for the statutory activities in Section 400.9935(1)(a)-(g), F.S. If the medical or clinic director signs the application or change of medical or clinic director form, acknowledging these responsibilities as specified in Section 400.9935, F.S., this requirement is met.

- (c) Written policies, protocols, guidelines and procedures used or to be used by the facility staff in day-to-day operations. This includes, but is not limited to protocols for physician assistants and advanced registered nurse practitioners plus a copy of the supervision form submitted to the Department of Health by the physician supervisor.
- (d) Any policies, procedures, guidelines, checklists and/or means that are used in the systematic creation and maintenance of the health care clinic's medical record system.
- (e) Any policies, procedures, guidelines, checklists that demonstrate compliance with the medical records retention, disposition, reproduction, and disclosure requirements of the medical or clinic director's practice act.
- (f) Any policies, procedures, guidelines, checklists that demonstrate compliance with the office surgery requirements of the practice acts for services performed at the facility.
- (g) Any policies, procedures, guidelines, checklists that demonstrate compliance with adverse incident reporting requirements and injury disclosure.
 - (h) Personnel files.
- (i) Logs, charts or notes demonstrating day-to-day oversight of health care clinic activities by the medical or clinic director.
- (j) Copies of professional licenses issued by the respective boards and the Department of Health under the several practice acts.
- (k) Any patient referral contracts or agreements of the health care clinic that are in writing and a disclosure to the surveyor of any such agreements that are not in writing including the names of the parties to the agreement, the date and the essential terms of agreement.
- (l) For health care clinics that are in operation at the time of the survey, the surveyor will select a sample of at least five (5) patient medical records from the previous 6 months of operation with at least one (1) Medicaid file, if certified as a Medicaid provider, plus the five (5) billing records that correspond with the five patient records.
- (m) Description of means by which the health care clinic conducts a systematic review of billings that ensures billings are not fraudulent or unlawful. A sample must be reviewed by the medical director or clinic director at least once every 30 days and a record maintained by the health care clinic for at least three years identifying the records reviewed and when and what action was taken to correct fraudulent or unlawful billings. A log of systematic reviews shall be kept and maintained in a discrete file at the health care clinic for review on request of the Agency during the retention period.
- (n) List of services provided or a general descriptor of scope, level and complexity of care for services provided.
- (o) Current diagnostic and treatment equipment records showing equipment certification when such equipment must have regulatory certification. This requirement is met with presentation of a current maintenance agreement.

- (p) An organizational flow chart with lines of authority and names of key individuals and positions.
- (q) An all-inclusive and up to date listing of original signatures and initials of all persons entering information billing and patient records, the printed name and medical designation, if any, such as PA, RN, MD, etc. The log shall be kept and concurrently maintained at the health care clinic. Information required by this rule shall be stored and maintained by the health care clinic for a period of 5 years.
- (r) Log of all natural person required and who have been screened under Level 2 criteria of Chapter 435, Section 400.991, F.S.
- (s) Documentation for the past two years or from the date of licensure, whichever is earlier, demonstrating in writing compliance, when, and what action was taken by the medical or clinic director to perform the functions, duties and clinic responsibilities under Sections 400.9935(1)(a)-(g), F.S. Such documentation shall be made available to authorized agency personnel upon request.

Specific Authority 400.9925 FS. Law Implemented <u>120.542</u>, <u>120.60(6)</u>, <u>400.9905(5)</u>, <u>400.9915(3)</u>, <u>400.995(1)</u>, <u>(6)</u>, <u>(8)</u> FS. History–New

59A-33.013 Medical and Clinic Directorships Maximum Number of Clinics.

A medical or clinic director may not serve in that capacity for more than a maximum of five health care clinics with a cumulative total of more than 200 employees and persons under contract with the health care clinic at given time. A medical or clinic director may not supervise a health care clinic more than 200 miles from any other health care clinic supervised by the same medical or clinic director.

Specific Authority 400.9925(2) FS. Law Implemented 400.9925(2) FS. History–New_____.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Division of Florida Land Sales, Condominiums, and Mobile Homes

RULE NO.: RULE TITLE:

61B-75.004 Audio or Video Recording of

Meetings

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)l., F.S., published in Vol. 32, No. 16, April 21, 2006, issue of the Florida Administrative Weekly.

NOTE: The add/delete coding shown on the following changes reflects changes from text as proposed rather than amendments from current Florida Administrative Code.

Section 61B-75.004 is amended to read:

61B-75.004 Audio or Video Recording of Meetings.

Any unit owner is entitled to tape record or videotape meetings of the board of administration, committee meetings, or unit owner meetings, subject to the following restrictions:

- (1) Rules: Associations may adopt rules, which are consistent with this rule, regarding the placement and use of audio and video equipment by unit owners who exercise their rights to tape association meetings. Association rules for this purpose must be adopted in accordance with the procedures for adopting association rules established by the cooperative documents. The only audio and video equipment and devices which unit owners are authorized to utilize at any such meeting is equipment which does not produce distracting sound or light emissions.
- (2) <u>Placement: Audio and video equipment shall be assembled and placed in position in advance of the commencement of the meeting.</u> If adopted in advance by the board or unit owners as a written rule, audio
- (3) <u>Use: Anyone videotaping or recording a meeting shall</u> not be permitted to move about the meeting room in order to <u>facilitate the recording.</u> If adopted in advance by the board or <u>unit owners as a written rule, anyone</u>
- (4) If adopted in advance by the board or unit owners as a written rule, advance notice shall be given to the board by any unit owner desiring to utilize any audio or video equipment.

Specific Authority 719.106(1)(c), (d)5. FS. Law Implemented 719.106(1)(c), (d)5. History–New ______.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Accountancy

RULE NO.: RULE TITLE:

61H1-26.005 Notification of Address Change

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. 32, No. 3, of the January 20, 2006, issue of the Florida Administrative Weekly. The change is in response to written comments submitted by the staff of the Joint Administrative Procedures Committee. The changes are as follows:

Subsection (3) will be stricken in its entirety.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: John Johnson, Division Director, Board of Accountancy/MQA, 240 N.W. 76th Dr., Suite A, Gainesville, Florida 32607

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Accountancy

RULE NO.: RULE TITLE:

61H1-33.003 Continuing Professional Education

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. 32, No. 10, of the March 10, 2006, issue of the Florida Administrative Weekly. The change is in response to written comments submitted by the staff of the Joint Administrative Procedures Committee.

The rule shall now read as follows:

- (1) through (4) No change.
- (5)(a) No change.
- (b)1. through 4. No change.
- 5. Formal correspondence or other individual study programs must require registration and provide evidence of satisfactory completion and shall be credited for continuing professional education purposes as approved in an amount equal to one-half of the average completion time established by the course sponsor. Formal correspondence or other individual study programs must be pre-approved by the Committee on Continuing Professional Education. In order to receive approval of courses and/or providers, evidence of the following must be submitted by the provider:
 - a. That there is a registration requirement,
- b. That the course is developed and intended primarily as an educational activity.
- c. That the course has been pre-tested to determine the average completion time,
- (I) Non interactive programs shall be credited in an amount equal to one half of the average completion time, and
- (II) Interactive programs shall be credited for actual completion time,
 - d. Evidence of satisfactory completion,
- e. An evaluation (test) to determine whether learning objectives where met has been conducted.
- (6) Each certified public accountant shall, on or before July 15 prior to his biennial license renewal, report on forms prescribed by the Board, programs of continuing professional education completed during the applicable reestablishment period. Each certified public accountant's documentation supporting such programs shall be retained through the two vears following a two-year reestablishment period. Documentation is to be retained to support evidence of completion of the required hours to enable a random audit by the Department of Business and Professional Regulation to determine compliance with the requirements. If staff review or review by the Committee on Continuing Professional Education determines that courses are either improperly classified or do not otherwise meet the requirements of the chapter, then the licensee will be given 60 days from the date of notification, but no later than December 31 +, to comply with the continuing professional education requirements. Licensees who complete the continuing professional education

requirements timely but who are found to be deficient after December 31 4, of their renewal year must correct the error and pay a \$50 fine within 60 days.

(7) No change.

Specific Authority 120.55(1)(a)4., 455.213(6), 455.2177, 455.2178, 455.2179, 473.304, 473.305, 473.312 FS. Law Implemented 455.213(6), 455.2177, 455.2178, 455.2179, 473.305, 473.312(1)(a), (c) FS. History–New 12–4-79, Amended 2-3-81, 4-5-83, 10-19-83, 8-20-85, Formerly 21A-33.03, Amended 9-18-88, 7-7-92, 12-2-92, Formerly 21A-33.003, Amended 12-14-93, 1-26-98, 12-17-00, 8-21-01, 3-21-05, 5-18-05, 7-10-05,

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: John Johnson, Division Director, Board of Accountancy/MQA, 240 N.W. 76th Dr., Suite A, Gainesville, Florida 32607.

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Accountancy

RULE NO.: RULE TITLE:

61H1-33.006 Inactive or Delinquent Florida

Certified Public Accountants Who Desire to Become Active Licensees

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., FS., published in Vol. 32, No. 13, of the March 31, 2006, issue of the Florida Administrative Weekly. The change is in response to written comments submitted by the staff of the Joint Administrative Procedures Committee. The rule shall now read as follows:

61H1-33.006 Inactive <u>or Delinquent</u> Florida Certified Public Accountants Who Desire to Become Active Licensees.

- (1) Each certified public accountant who has requested or reverted to inactive status or became delinquent as distinguished from a certified public accountant whose certificate or license has been suspended who desires to become an active licensee, i.e., engage or reengage in the practice of public accounting in Florida, shall apply for such reactivation by completing and submitting to the Department Forms DBPR 0010-2 Master Individual Application and DBPR CPA-501101 Request for Change of Status, hereby incorporated by reference and effective and respectively; copies of these forms may be obtained from the board office on forms prescribed by the Board and submitted to the Department.
- (2) Each such application shall demonstrate successful completion of the required number of continuing professional education hours. Inactive <u>or delinquent</u> licensees must satisfy the requirements of their last reestablishment period, plus successful completion of at least 32 hours total, of which at least 8 hours must be in accounting and auditing subjects for each year or portion thereof the license was inactive and/or

delinquent prior to July 1, 1989 and 40 hours total, of which at least 10 hours must be in accounting and auditing subjects for each year or portion thereof license was inactive after June 30, 1989. No more than 25% of the total required hours may be in defined behavioral subjects, as in 61H1-33.003(3)(c), F.A.C., if taken subsequent to July 1, 1985. At least eighty percent (80%) of the The necessary hours must have been completed in the twenty-four months immediately preceding the date of application for reactivation. This twenty-four month requirement will be waived where the licensee can document completion of the CPE requirements in all biennia in the same manner as if the licensee had remained active.

(3) through (4) No change.

Specific Authority <u>455.271</u>, 473.304, 473.311, 473.312, 473.313 FS. Law Implemented <u>455.271</u>, 473.311, 473.312, 473.313, 473.323(1)(i)(h) FS. History–New 12-4-79, Amended 2-3-81, 11-6-83, 3-29-84, 8-20-85, Formerly 21A-33.06, Amended 4-8-86, 12-28-89, 10-16-90, Formerly 21A-33.006, Amended 12-14-93, 5-26-96.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: John Johnson, Division Director, Board of Accountancy/MQA, 240 N.W. 76th Dr., Suite A, Gainesville, Florida 32607

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."

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."

STATE BOARD OF ADMINISTRATION

RULE NO.: RULE TITLE:

19ER06-2 Revenue Bonds Issued Pursuant to

Section 215.555(6), F.S.

SPECIFIC REASONS FOR FINDING AN IMMEDIATE DANGER TO THE PUBLIC, HEALTH, SAFETY OR WELFARE: The 2006 Legislature passed CS/CS for SB 1980 on Friday, May 5, 2006. In anticipation of the issuance of bonds by the Florida Hurricane Catastrophe Fund (FHCF), as