

Ippolito, Bureau Chief, Bureau of Monitoring and Audit, Division of Workers' Compensation, Department of Financial Services, 200 East Gaines Street, Tallahassee, Florida 32399-4224, (850)413-1775

THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS AVAILABLE ON THE DEPARTMENT'S DIVISION OF WORKERS' COMPENSATION WEBSITE AT: <http://www.fldfs.com/wc/>. 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

Notices for the Board of Trustees of the Internal Improvement Trust Fund between December 28, 2001 and June 30, 2006, go to <http://www.dep.state.fl.us/> under the link or button titled "Official Notices."

### STATE BOARD OF ADMINISTRATION

RULE NO.: 19-9.001  
RULE TITLE: Investment Policy Statement  
PURPOSE AND EFFECT: To adopt the most recent version of the Investment Policy Statement.

SUMMARY: The latest version was approved by the Trustees on December 9, 2008.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The agency has determined that this rule will not have an impact on small business. A SERC was prepared in an abundance of caution.

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

RULEMAKING AUTHORITY: 121.4501(8)(a), 215.52 FS.

LAW IMPLEMENTED: 121.4501(1), (2), (3), (4), (5), (6), (7), (8), (9), (10), (11), (12), (13), (14), (15) FS.

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

DATE AND TIME: Monday, April 13, 2009, 9:00 a.m. – 11:00 a.m.

PLACE: Hermitage Room, the Hermitage Centre, 1801 Hermitage Blvd., Tallahassee, FL 32308

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Cindy Morea, Office of Defined Contributions,

1801 Hermitage Blvd, Tallahassee, FL 32308; tel: (850)413-1491 or [cindy.morea@sbalfa.com](mailto:cindy.morea@sbalfa.com). If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Cindy Gokel, Assistant General Counsel, SBA, 1801 Hermitage Blvd., Tallahassee, FL 32308; tel: (850)413-1199; or [cindy.gokel@sbafila.com](mailto:cindy.gokel@sbafila.com)

THE FULL TEXT OF THE PROPOSED RULE IS:

#### 19-9.001 Investment Policy Statement.

The Florida Retirement System Public Employee Optional Retirement Program Investment Policy Statement, as approved by the Trustees of the State Board of Administration on December 9, 2008 ~~February 1, 2005~~, is hereby adopted and incorporated by reference. The Investment Policy Statement may be obtained by contacting: State Board of Administration, 1801 Hermitage Blvd., Suite 100, Tallahassee, Florida 32308; Attn: Office of Defined Contribution Programs.

Rulemaking Specific Authority 121.4501(8)(a), 215.52 FS. Law Implemented 121.4501(1), (2), (3), (4), (5), (6), (7), (8), (9), (10), (11), (12), (13), (14), (15) FS. History--New 7-29-01, Amended 7-23-02, 5-10-05,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: John Benton, Senior Investment Policy Officer, SBA

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Trustees of the State Board of Administration

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 10, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 23, 2009

### STATE BOARD OF ADMINISTRATION

RULE NOS.:	RULE TITLES:
19-11.003	Distributions from FRS Investment Plan Accounts
19-11.005	FRS Investment Plan Complaint Procedures
19-11.006	Enrollment Procedures for New Hires
19-11.007	Second Election Enrollment Procedures for the FRS Retirement Programs

PURPOSE AND EFFECT: To adopt amended forms, to adopt two definitions.

SUMMARY: To adopt four revised forms and two definitions and provide indications of the definitions' usage.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS:** The agency has determined that these rules will not have an impact on small business. A SERC has been prepared in an abundance of caution.

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

**RULEMAKING AUTHORITY:** 121.4501(3)(c)4., (8)(a) FS.

**LAW IMPLEMENTED:** 120.569, 120.57, 120.573, 121.012(29), (39), 121.051, 121.055, 121.35, 121.4501(2), (3), (4), (5), (6), (8)(b)4., (9)(f)3., (15)(b), 121.591, 121.73, 121.77, 121.78, 215.44(8)(b), 1012.875(3) FS.

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

**DATE AND TIME:** Monday, April 13, 2009, 9:00 a.m. – 11:00 a.m.

**PLACE:** Hermitage Room, Hermitage Centre, 1801 Hermitage Blvd., Tallahassee, FL 32308

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Cindy Morea, Office of Defined Contributions, SBA, 1801 Hermitage Blvd., Tallahassee, FL 32308; (850)413-1491; cindy.morea@sbafla.com. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

**THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS:** Cindy Gokel, SBA, 1801 Hermitage Blvd., Tallahassee, FL 32308; (850)413-1199; cindy.gokel@sbafla.com

**THE FULL TEXT OF THE PROPOSED RULES IS:**

19-11.003 Distributions from FRS Investment Plan Accounts.

(1) through (2) No change.

(3) Distributions available after the member terminates FRS-covered employment.

(a) An FRS Investment Plan member shall not be entitled to a distribution from his account unless he has been terminated from all FRS-covered employment, including temporary, part-time, Other Personal Services (OPS) and any regularly established position with an FRS employer, for three (3) calendar months following the month of termination. Example: If a member terminates on May 15, the three calendar months are June, July, and August. Therefore, the member cannot request a distribution until September. The termination form is called "Employment Termination Form."

Form ETF-2, rev. 01/09 and can be found on the MyFRS website. This form has instructions and a section for employer certification.

(b) Upon the expiration of the three calendar months after termination, the member may request a distribution from the FRS Investment Plan Administrator, by calling the toll free MyFRS Financial Guidance Line at 1(866)446-9377, Option 4.

(c) If a member has terminated employment from all FRS-covered employment for one calendar month and he has reached his normal retirement date, in accordance with Section 121.021(29), F.S., he may request a one-time distribution of up to 10 percent (10%) of his account balance. For example, if a member terminates on May 15, the one calendar month is June. Therefore, the member can request a one-time distribution of up to 10 percent (10%) in July.

(d) A member who transfers to the Pension Plan from the Investment Plan and leaves a balance in the member's Investment Plan account is a member of the Pension Plan and, as such, the member cannot take a distribution of the surplus Investment Plan funds until he begins receiving his Pension Plan benefits.

(4) Distributions to beneficiaries on the death of a member.

(a) If a member dies before his effective date of retirement, the member's spouse at the time of his or her death shall be the member's beneficiary, unless the member has designated a different beneficiary after the member's most recent marriage. If the member did name another beneficiary after his or her most recent marriage, the named beneficiary will receive the member's account balance.

(b) Procedures for beneficiary designations are addressed in Rule 19-11.002, F.A.C.

(c) On the death of a member, the beneficiary must file Form IPDB, "Death Benefit Information and Distribution Claim Form," rev. 01-09 ~~08-06~~, which is hereby adopted and incorporated by reference, with the FRS Investment Plan Administrator, to receive benefits.

(5) through (7) No change.

Rulemaking Specific Authority 121.4501(8)(a) FS. Law Implemented 121.021(29), (39), 121.4501(20), 121.591, 121.77 FS. History—New 3-9-06, Amended 11-26-07, \_\_\_\_\_.

19-11.005 FRS Investment Plan Complaint Procedures.

(1) through (2) No change.

(3) Procedures.

(a) Intervention:

1. The Member may send a written Request for Intervention to the SBA for intervention and resolution. The written Request for Intervention shall be sent:

a. By regular US mail service to:  
Investment Plan Complaint Resolution  
Office of Defined Contribution Programs  
State Board of Administration  
P. O. Box 13300  
Tallahassee, FL 32317-3300

b. By e-mail: [DefinedContributionPrograms@sbafla.com](mailto:DefinedContributionPrograms@sbafla.com);

or

c. By fax: (850)413-1489.

2. The Member shall use “FRS Investment Plan Request for Intervention,” Form SBA-RFI 01/2009 ~~08/2007~~, which is hereby adopted and incorporated by reference. The form may be obtained by using the toll free number at 1(866)446-9377 and requesting that it be mailed to the Member or by accessing the MyFRS.com website, clicking on Resources, and then clicking on Forms. By using this form, the Member grants permission to the SBA to obtain any personally identifiable information shared with or generated by any services provider to the FRS, including the MyFRS Financial Guidance Program.

3. The Member must provide all information. If all information is not provided, the form shall be returned to the Member so that the missing information can be added.

4. Upon receipt of the complete Request for Intervention, an acknowledgment will be sent by regular US mail or emailed to the Member.

5. The SBA will conduct an investigation and prepare and send to the Member an agency action letter detailing the SBA’s findings; any proposed resolution; and information on the next steps in the dispute resolution process.

(b) Second Step: Hearing Request.

1. If the Member is not satisfied with the proposed resolution as set out in the agency action letter, the Member may file a Petition for Hearing, “FRS Investment Plan Petition for Hearing,” Form SBA-PFH 01/2009 ~~08/2007~~, which is hereby adopted and incorporated by reference, with the SBA. The Petition for Hearing is routinely attached to the agency action letter and may also be obtained by calling the toll free number at 1(866)446-9377 and requesting that it be sent to the Member or by accessing the MyFRS.com website, and clicking on Resources and then clicking on Forms. The Petition for Hearing must be received within 21 days of the Member’s receipt of the agency action letter or it will be rejected as untimely and the Member will have waived his right to a hearing.

2. The Member shall use “FRS Investment Plan Petition for Hearing,” Form SBA-PFH 01/2009 ~~SBA-PFH 08/2006~~. By using this form, the Member grants permission to the SBA to obtain any personally identifiable information shared with or generated by any services provider to the FRS, including the MyFRS Financial Guidance Program.

3. Upon receipt of the Petition for Hearing, the SBA has 15 days to respond to the petition, in accordance with Section 120.569(2)(a), F.S.

4. If the hearing request contains a disputed issue of material fact, the SBA shall, within the required 15 days, forward the hearing request to the Division of Administrative Hearings, requesting that an administrative law judge be assigned to conduct the hearing and so notify the Member.

5. If there is no disputed issue of material fact, then the SBA shall assign the matter to a presiding officer, who will send out a “Notice of Proceeding and Initial Order of Instructions” to the Petitioner and to Respondent’s counsel.

6. The balance of the hearing process shall conform to the requirements of Chapter 120, F.S.

Rulemaking Specific 121.4501(8)(a) FS. Law Implemented 120.569, 120.57, 120.573, 121.4501(9)(f)3. FS. History—New 10-21-04, Amended 3-9-06, 11-26-07,\_\_\_\_\_.

19-11.006 Enrollment Procedures for New Hires.

(1) Purpose. No change.

(2) Definitions.

(a) through (d) No change.

(e) “Electronic Means” shall mean an enrollment on the MyFRS.com website, by telephone or other technology as specified by the SBA in a subsequent amended rule.

~~(f)~~(e) “Employee” means an eligible employee as defined in Section 121.4501(2)(d), F.S.

~~(g)~~(f) “Employer” means an employer as defined in Section 121.4501(2)(e), F.S. For purposes of the FRS Investment Plan, there are three general categories of employers: state agencies; school districts; and local employers.

~~(h)~~(g) “FRS Investment Plan” means the defined contribution retirement program of the Florida Retirement System, established in Parts II and III of Chapter 121, F.S. Although established in Parts II and III, certain parts of Part I of Chapter 121, F.S., also apply to the FRS Investment Plan. The FRS Investment Plan has two parts: the FRS Investment Plan and the FRS Investment Plan Hybrid Option, also known as the FRS Hybrid Option.

~~(i)~~(h) “FRS Pension Plan” means the defined benefit retirement program of the Florida Retirement System, established in Part I of Chapter 121, F.S.

~~(j)~~(i) “Florida Retirement System Trust Fund” or “FRSTF” shall mean the trust fund holding the assets of the FRS Pension Plan, which is the defined benefit plan of the Florida Retirement System.

~~(k)~~(j) “Grace Period” means that procedure described in subsection (6), below, which permits, under certain circumstances, the voiding of a retirement plan election.

~~(l)~~(k) “Member” means an employee who elects to join the FRS Investment Plan or the FRS Investment Plan Hybrid Option.

~~(m)(4)~~ “Public Employee Optional Retirement Program” or “PEORP” means the defined contribution retirement program of the Florida Retirement System established by Section 121.4501, F.S., more commonly known as the FRS Investment Plan.

~~(n)(m)~~ “SBA” means the State Board of Administration of Florida.

~~(o)(n)~~ “True-up Amount” means the difference between the ABO calculated by using the member’s actual creditable service and the actual final average compensation as of the member’s effective date in the FRS Investment Plan and the ABO initially transferred.

(3) General Enrollment Procedures.

(a) All newly-hired employees are initially enrolled in the FRS Pension Plan. If a newly-hired employee chooses, within the statutory election period, to enroll in the FRS Investment Plan, or the FRS Investment Plan Hybrid Option, the effective date of enrollment in the FRS Investment Plan or the FRS Investment Plan Hybrid Option is the date of hire of the employee. However, the employer contributions received by an employee prior to effective enrollment in the FRS Investment Plan or the FRS Investment Plan Hybrid Option will be transferred into the employee’s FRS Investment Plan or FRS Investment Plan Hybrid Option account at the rate the employer was required to contribute for that employee. Only after effective enrollment in the FRS Investment Plan or the FRS Investment Plan Hybrid Option will the employee receive the employer contribution at the FRS Investment Plan or FRS Investment Plan Hybrid Option rate appropriate to that employee’s class of membership, as specified in Section 121.4501(4)(a)2.b., (b)2.b., and (c)2.b., F.S.

(b) Eligible newly-hired employees enrolled in the regular, special risk, and special risk administrative support classes may choose to enroll in the FRS Investment Plan by submitting an enrollment form or by electronic means.

(c) Eligible newly-hired employees enrolled in the Elected Officers’ Class or Senior Management Service Class may only enroll in the FRS Investment Plan by submitting an enrollment form.

(d) Eligible newly-hired employees eligible to enroll in the Community College Optional Retirement Program or State University System Optional Retirement Program may only enroll in the FRS Investment Plan by submitting an enrollment form.

~~(e)(b)~~ Enrollment forms are available in the enrollment package which is sent to an employee’s address of record or by accessing [www.MyFRS.com](http://www.MyFRS.com), and clicking on Resources and then on Forms; or by calling toll-free 1(866)446-9377, or for the hearing impaired 1(888)429-2160.

(4) Specific Enrollment Procedures.

(a) through (c) No change.

(d)1. The enrollment by form or electronic means shall be complete and the election shall be final if all the required information is clearly indicated and if the enrollment ~~form~~ is received by the Administrator by 4:00 p.m. Eastern Time. The form shall be transmitted via the U.S. mail.

2. The Administrator shall determine that the employee’s enrollment in the FRS Investment Plan is within the prescribed time period, ~~the form in toto~~ is complete, and the employee’s election is clearly indicated. If the Administrator determines that the enrollment is incomplete, the employee will be required to resubmit a completed enrollment form shall be returned to the employee and resubmitted when complete. An incomplete enrollment by form is a form which is missing the name ~~and address and phone numbers~~ of the member, social security numbers, plan selection, signatures, or dates. If the form is incomplete only because the member has made no investment selection, the form will be processed and the member will be defaulted into the FRS Select Moderate Balanced Fund for investing his accumulated benefit obligation and all future contributions. Note that this default selection may be changed by the member at any time once the transfer has been made. An incomplete enrollment by electronic means is one in which the Administrator has no record of receipt and processing of the electronic enrollment.

(e) through (f) No change.

(5) through (9) No change.

Rulemaking Specific 121.4501(3)(c)4., (8)(a) FS. Law Implemented 121.051, 121.055, 121.35, 121.4501(2), (3), (4), (5), (6), (8), (15), 121.73, 121.74, 121.78, 215.44(8)(b), 1012.875(3) FS. History—New 10-21-04, Amended 3-9-06, 10-25-07, 12-8-08, \_\_\_\_\_.

19-11.007 Second Election Enrollment Procedures for the FRS Retirement Programs.

(1) through (3) No change.

(4) Specific Procedures for the “2nd Election Retirement Plan Enrollment Form.”

(a) All members are required to fill out Section 1 of the form by providing the member’s name and Social Security number and checking only one of three boxes, indicating which choice the member is making. These boxes contain the following information:

1. Change from the FRS Investment Plan or FRS Investment Plan Hybrid Option to the FRS Pension Plan (Please complete Section 4, as described in paragraph (d) below). I understand I am using my existing FRS Investment Plan account balance to “buy” into the FRS Pension Plan. I understand that if my account balance is not sufficient to cover the cost of the “buy in”, I must pay the balance due from my personal funds before being allowed into the FRS Pension Plan. The Division of Retirement is responsible for calculating the buyback amount for those wishing to use their second elections to transfer to the FRS Pension Plan. The actuarial calculation is a forward-looking projection based on the

employee's salary and service and increases as additional creditable service and salary are earned. I understand that I may move my FRS Investment Plan account balance into more conservative, less risky investment options within the FRS Investment Plan in order to potentially reduce the volatility of my account balance prior to liquidation and movement to the FRS Pension Plan. Note that if a member transfers from the Investment Plan to the Pension Plan and leaves a balance in the member's Investment Plan account, the member is a member of the Pension Plan. As such, the member cannot take a distribution of the surplus Investment Plan funds until he begins receiving his Pension Plan benefits.

2. Change from the FRS Pension Plan to the FRS Investment Plan (Please complete Sections 3 and 4, as described in paragraphs (c) and (d), below). I understand I am transferring the present value, if any, of my FRS Pension Plan benefit to the FRS Investment Plan. I understand that I will have future employer contributions deposited in my Investment Plan account.

3. Change from the FRS Pension Plan to the FRS Investment Plan Hybrid Option (Please complete Sections 3 and 4, as described in paragraphs (c) and (d) below). I am retaining any accrued benefit in the FRS Pension Plan with future employer contributions deposited in my FRS Investment Plan Hybrid Option account. I understand that I must have 5 years of Pension Plan service to select this option.

(b) through (k) No change.

(5) Specific Procedures for the "2nd Election EZ Retirement Plan Enrollment Form."

(a) Form ELE-2EZ, "2nd Election EZ Retirement Plan Enrollment Form," Rev. 11-08 ~~7-08~~, is hereby adopted and incorporated by reference.

(6) No change.

Rulemaking Specific Authority 121.4501(8)(a) FS. Law Implemented 121.4501(3), (4), (8)(b)4., (15)(b), (20) FS. History—New 10-21-04, Amended 3-9-06, 10-25-07, 12-8-08, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Ron Poppell, Office of Defined Contributions, SBA

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Trustees of the State Board of Administration

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 10, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 23, 2009

#### STATE BOARD OF ADMINISTRATION

RULE NO.: 19-12.007  
RULE TITLE: Acceptance of Rollovers

PURPOSE AND EFFECT: To adopt a revised form.

SUMMARY: To adopt a revised version of the rollover instructions and form

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The agency has determined that this rule will not have an impact on small business. A SERC has been prepared in an abundance of caution.

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

RULEMAKING AUTHORITY: 121.4501(5)(c) FS.

LAW IMPLEMENTED: 121.4501(5)(c), (21) FS.

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

DATE AND TIME: Monday, April 13, 2009, 9:00 a.m. – 11:00 a.m.

PLACE: Hermitage Room, Hermitage Centre, 1801 Hermitage Blvd., Tallahassee, FL 32308

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Cindy Morea, Office of Defined Contributions, SBA, 1801 Hermitage Blvd., Tallahassee, FL 32308; (850)413-1491; cindy.morea@sbafla.com. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Cindy Gokel, SBA, 1801 Hermitage Blvd., Tallahassee, FL 32308; (850)413-1199; cindy.gokel@sbafla.com

THE FULL TEXT OF THE PROPOSED RULE IS:

19-12.007 Acceptance of Rollovers.

(1) through (4) No change.

(5) Instructions regarding check delivery and other information relating to the processing of rollovers may be obtained by calling the MyFRS Financial Guidance Line which is a toll free line: 1(866)446-9377 or accessing the website at www.MyFRS.com. Participants shall use Form IPRO-1, rev. 11-08 ~~09-05~~, "Employee Rollover Deposit Instructions and Form," which is hereby adopted and incorporated by reference, to effect rollovers described in this rule. Former DROP members shall use Form IP-DROP-RO-1, "DROP Direct Rollover Form for Former DROP Members," rev. 07-05, and current DROP members planning to roll over their DROP accumulation shall use Form IP-DROP-AD-1, "DROP Accumulation Direct Rollover Form for Current DROP Members," rev. 07-05, both of which are adopted and incorporated by reference, to effect rollovers described in this rule.

(6) No change.

Rulemaking Specific Authority 121.4501(5)(c) FS. Law Implemented 121.4501(5)(c), (21) FS. History—New 12-8-02, Amended 10-21-04, 3-9-06, 10-25-07, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Ron Poppell, Office of Defined Contributions

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Trustees of the State Board of Administration

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 10, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 23, 2009

## **WATER MANAGEMENT DISTRICTS**

### **Suwannee River Water Management District**

RULE NO.: 40B-3.101      RULE TITLE: Content of Application

PURPOSE AND EFFECT: The purpose of the proposed rule is to update Rule 40B-3.101, Florida Administrative Code, to require proof of real property ownership and tax parcel identification numbers on water well construction permit applications. The effect of the proposed rule amendments will also provide for better identification of wells, and in turn, staff will be able to better assist with public inquiries.

SUMMARY: This proposed rule will require proof of real property ownership and tax parcel identification numbers on water well construction permit applications, thereby ensuring that permits are issued for the correct parcel, and providing better identification of wells in the future.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The District estimates that the proposed rule will result in an average increase of \$18 per application to affected parties. The proposed rule requires proof of real property ownership and tax parcel identification numbers on water well construction permit applications. This new requirement will facilitate the need to acquire data from county property appraiser websites. Many District contractors have internet service, and can acquire this data from their business headquarters. However, there may be some businesses that do not have internet service or access, therefore, the contractor may need to use the public library for internet access. Assuming that the average distance to the county public library is 15 miles, and at a rate of \$0.445 per mile (the rate used by the State of Florida), the District calculates the cost per two-way trip to be \$18.

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

RULEMAKING AUTHORITY: 373.044, 373.113, 373.171 FS.

LAW IMPLEMENTED: 373.308, 373.309, 373.313, 373.326, 373.342, 403.0877 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: Linda Welch, Administrative Assistant, Suwannee River Water Management District, 9225 C.R. 49, Live Oak, Florida 32060; (386)362-1001 or (800)226-1066 (FL only).

THE FULL TEXT OF THE PROPOSED RULE IS:

40B-3.101 Content of Application.

(1) through (2)(g) No change.

(h) The location of the well (to the nearest 1/4 section, and ~~or~~ latitude and longitude to the nearest second), including the county, subdivision name, and a site map to scale depicting landmarks; ~~and~~

(i) The contractor's or owner's agreement to comply with all District rules;

(j) Tax parcel identification number of real property; and

(k) Proof of real property ownership.

(3) through (5) No change.

Rulemaking Specific Authority 373.044, 373.113, 373.171 FS. Law Implemented ~~17-101.040(12)(a)4, F.A.C.~~; 373.308, 373.309, 373.313, 373.326, 373.342, 403.0877 FS. History—New 7-1-85, Amended 8-15-89, 4-4-91, 6-22-99, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Jon Dinges, Director, Resource Management, Suwannee River Water Management District, 9225 County Road 49, Live Oak, Florida 32060, (386)362-1001

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Governing Board of the Suwannee River Water Management District

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 10, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: November 26, 2008

## **WATER MANAGEMENT DISTRICTS**

### **Suwannee River Water Management District**

RULE NO.: 40B-3.411      RULE TITLE: Completion Report

PURPOSE AND EFFECT: The purpose of the proposed rule is also to update Rule 40B-3.411, Florida Administrative Code, to require a latitude and longitude for each well on water well completion reports. The effect of the proposed rule amendments will assist staff in ensuring that permits are issued for the correct parcel, and will provide for better identification of wells for public inquiries.

SUMMARY: The proposed rule will also require a latitude and longitude for each well on water well completion reports, thereby enabling staff to better assist the public when inquiries are made.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS:** The District estimates that the proposed rule will result in an average increase of \$124 to affected parties. The proposed rule requires a latitude and longitude for each well on well completion reports. This new requirement will facilitate the need to acquire a Global Positioning System (GPS). Many District contractors have already been provided a GPS by the District, and many cell phones are equipped with GPS tools. The cost of purchasing a GPS suited to meet the needs of this new rule requirement ranges from \$98 to \$150, therefore the District determined the average cost to be \$124.

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

**RULEMAKING AUTHORITY:** 373.044, 373.113, 373.171 FS.

**LAW IMPLEMENTED:** 373.308, 373.309, 373.313, 373.326, 373.342 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:** Linda Welch, Administrative Assistant, Suwannee River Water Management District, 9225 C.R. 49, Live Oak, Florida 32060; (386)362-1001 or (800)226-1066 (FL only)

**THE FULL TEXT OF THE PROPOSED RULE IS:**

40B-3.411 Completion Report.

(1) No change.

(2) Upon effective date of this rule, the water well contractor shall provide the latitude and longitude for each well on well completion reports. The format shall be in a manner specified by the District.

(3)(2) The water well contractor shall keep or cause to be kept in his employ an accurate log of all construction, repair, or abandonment activities. Such logs shall be available for inspection at the site during all times when work is in progress.

(4)(3) If no work is performed or if the well is not completed, a report shall be filed within 30 days of the expiration of the permit stating that no well construction was performed under the permit or outlining the status of the incomplete well.

(5)(4) The District shall also require that samples be taken during construction and furnished to the District with the completion report if construction is to be in certain areas of known surface or groundwater contamination. If samples are required, the District shall provide containers and instructions.

Rulemaking Specific Authority 373.044, 373.113, 373.171 FS. Law Implemented 373.308, 373.309, 373.313, 373.326, 373.342 FS. History—New 4-15-81, Amended 1-31-83, 7-1-85, 6-22-99,\_\_\_\_\_.

**NAME OF PERSON ORIGINATING PROPOSED RULE:** Jon Dinges, Director, Resource Management, Suwannee River Water Management District, 9225 County Road 49, Live Oak, Florida 32060, (386)362-1001

**NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE:** Governing Board of the Suwannee River Water Management District

**DATE PROPOSED RULE APPROVED BY AGENCY HEAD:** March 10, 2009

**DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW:** December 19, 2008

## **WATER MANAGEMENT DISTRICTS**

### **Suwannee River Water Management District**

**RULE NO.:**

**RULE TITLE:**

40B-400.115

Limiting Conditions

**PURPOSE AND EFFECT:** The purpose of the proposed rule is to update this section of Chapter 40B-400, Florida Administrative Code (F.A.C.), to amend limiting conditions for environmental resource permits (ERP), in Rule 40B-400.115, F.A.C. The effect of the proposed rule will be to include a new publication incorporated by reference, Florida Stormwater, Erosion and Sedimentation Control Inspectors Manual, and correct terminology to reflect the new publication incorporated by reference. In addition, the proposed rule will amend procedures for notification if historical or archaeological artifacts are discovered on property permitted under an ERP.

**SUMMARY:** This proposed rule will incorporate a new publication, Florida Stormwater, Erosion and Sedimentation Control Inspectors Manual, and correct terminology to reflect the new publication incorporated by reference. In addition, the proposed rule will amend procedures for notification if historical or archaeological artifacts are discovered on property permitted under an ERP.

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

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

**RULEMAKING AUTHORITY:** 373.044, 373.113, 373.118 FS.

**LAW IMPLEMENTED:** 373.118, 373.413, 373.416, 373.426 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:** Linda Welch, Administrative Assistant, Suwannee River Water Management District, 9225 C.R. 49, Live Oak, Florida 32060; (386)362-1001 or (800)226-1066 (FL only)

## THE FULL TEXT OF THE PROPOSED RULE IS:

40B-400.115 Limiting Conditions.

(1)(a) through (c) No change.

(d) Prior to and during construction, the permittee shall implement and maintain all erosion and sediment control measures (best management practices) required to retain sediment on-site and to prevent violations of state water quality standards. All practices must be in accordance with the Florida Stormwater, Erosion and Sedimentation Control Inspectors Manual guidelines and specifications in Chapter 6 of the Florida Land Development Manual: A Guide to Sound Land and Water Management (Florida Department of Environmental Regulation 1988), which is incorporated by reference, unless a project specific erosion and sediment control plan is approved as part of the permit, in which case the practices must be in accordance with the plan. If site specific conditions require additional measures during any phase of construction or operation to prevent erosion or control sediment, beyond those specified in the erosion and sediment control plan, the permittee shall implement additional best management practices as necessary, in accordance with the Florida Stormwater, Erosion and Sedimentation Control Inspectors Manual specifications in chapter 6 of the Florida Land Development Manual: A Guide to Sound Land and Water Management (Florida Department of Environmental Regulation 1988). The permittee shall correct any erosion or shoaling that causes adverse impacts to the water resources.

(e) through (r) No change.

(s) If evidence of the existence of historic resources is discovered or observed at permitted project sites or during permitted activities after a permit is issued, the applicant, owner, contractor, or agent thereof shall notify the District and the Division of Historical Resources, Compliance and Review Section (850)245-6333 within two working days. Examples of such evidence include whole or fragmentary stone tools, shell tools, aboriginal or historic pottery, historic glass, historic bottles, bone tools, historic building foundations, shell mounds, shell middens, or sand mounds. If historical or archaeological artifacts are discovered at any time on the project site, the permittee shall immediately notify the District.

(t) through (2) No change.

(3) The Governing Board hereby adopts by reference "Florida Stormwater, Erosion and Sedimentation Control Inspectors Manual", effective July 2008.

Rulemaking Specific Authority 373.044, 373.113, 373.118 FS. Law Implemented 373.118, 373.413, 373.416, 373.426 FS. History—New 10-3-95, Amended 3-7-02, 5-15-02,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Jon Dinges, Director, Resource Management, Suwannee River Water Management District, 9225 County Road 49, Live Oak, Florida 32060, (386)362-1001

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Governing Board of the Suwannee River Water Management District

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 10, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: December 19, 2008

**DEPARTMENT OF ELDER AFFAIRS****Training Requiring Provider and Curriculum Approvals**

## RULE NOS.:

## RULE TITLES:

58T-1.201

Purpose of Assisted Living Facility (ALF) Core Training Provider and Curriculum Approvals

58T-1.203

ALF Core Training Provider Qualifications

58T-1.205

ALF Minimum Core Training Curriculum Requirements

58T-1.207

ALF Core Training Provider Initial Registration Process

58T-1.209

Process for Maintaining ALF Core Training Provider Registration

58T-1.211

Registered ALF Core Training Provider Responsibilities

PURPOSE AND EFFECT: The purpose of these new rules is to comply with Section 429.52, F.S. The statute requires the department to "adopt or contract with another entity to develop a curriculum, which shall be used as the minimum core training requirements"; requires the department to "adopt rules to establish trainer registration requirements"; and authorizes the department to develop provider qualification criteria in addition to those included in Sections 429.52(10)(a) through (c), F.S.

SUMMARY: The adoption of a curriculum to be used as the minimum core training requirements; trainer registration requirements; provider qualifications in addition to those included in Sections 429.52(10)(a) through (c), F.S.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The proposed rules will have an impact on small business as defined in Section 288.703, F.S. Pursuant to Section 120.54(3)(a)1., F.S., the department's statement of estimated regulatory costs is provided. The amount is determined to be a one-time expense of up to a maximum of \$5,000.

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

RULEMAKING AUTHORITY: 429.52 FS.

LAW IMPLEMENTED: 429.52 FS.



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

DATE AND TIME: April 16, 2009, 9:30 a.m. – 12:30 p.m. EST.

PLACE: Department of Elder Affairs, 4040 Esplanade Way, Conference Room 225 F, Tallahassee, Florida 32399-7000

Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in this workshop/meeting is asked to advise the agency at least 72 hours before the workshop/meeting by contacting: Jim Crochet, Department of Elder Affairs, Office of the General Counsel, 4040 Esplanade Way, Suite 315, Tallahassee, Florida 32399-7000; telephone number: (850)414-2000; Email address: crocethj@elderaffairs.org. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Jim Crochet, Department of Elder Affairs, Office of the General Counsel, 4040 Esplanade Way, Suite 315, Tallahassee, Florida 32399-7000; telephone number: (850)414-2000; Email address: crocethj@elderaffairs.org

THE FULL TEXT OF THE PROPOSED RULES IS:

58T-1.201 Purpose of Assisted Living Facility (ALF) Core Training Provider and Curriculum Approvals.

The purpose of Rules 58T-1.203 through 58T-1.211, F.A.C., is to comply with the ALF core training provider and curriculum requirements as specified in Section 429.52, F.S.

Rulemaking Authority 429.52 FS. Law Implemented 429.52 FS. History–New \_\_\_\_\_.

58T-1.203 ALF Core Training Provider Qualifications.

(1) PRIMARY REQUIREMENTS. In order to register as an assisted living facility core training provider (hereafter referred to as “core training provider,” “training provider,” or “provider”), all applicants must meet the requirements outlined in Section 429.52(9), F.S., which include proof of the following:

(a) Completion of the minimum core training requirements developed by the department pursuant to Section 429.52(8), F.S., and Rule 58T-1.205, F.A.C.;

(b) Successful passage of the competency test; and

(c) Compliance with the minimum of 12 contact hours of continuing education in topics related to assisted living every 2 years pursuant to Section 429.52(4), F.S., and paragraph 58A-5.0191(1)(c), F.A.C.

(2) ADDITIONAL REQUIREMENT. In addition to meeting the 3 primary requirements set forth in subsection (1) of this rule, applicants must meet one of the requirements outlined in Section 429.52(10), F.S., or one of the requirements established in this subsection, which include the following:

(a) A minimum of 5 years of employment with the Agency for Health Care Administration (AHCA), or formerly the Department of Health and Rehabilitative Services, as a surveyor of assisted living facilities; or

(b) A minimum of 5 years of employment in a professional position in the AHCA Assisted Living Unit; or

(c) A minimum of 5 years of employment as an educator or staff trainer for persons working in an ALF or other long-term care (LTC) settings; or

(d) A minimum of 5 years of employment as an assisted living facility core trainer, which was not directly associated with the department; or

(e) A minimum of a 4-year degree from an accredited college or university in areas of healthcare, gerontology, social work, education or human services; and a minimum of 3 years experience as an educator or staff trainer for persons working in an ALF or other LTC settings after core certification.

Rulemaking Authority 429.52 FS. Law Implemented 429.52 FS. History–New \_\_\_\_\_.

58T-1.205 ALF Minimum Core Training Curriculum Requirements.

(1) CURRICULUM REQUIREMENTS. An approved core training provider must conduct core training using the curriculum outlined in DOE Form ALFCT-001, Assisted Living Facility Minimum Core Training Curriculum, \_\_\_\_\_, 2009, which is incorporated by reference in this rule. The curriculum is available from the Department of Elder Affairs, Elder Housing Unit, 4040 Esplanade Way, Tallahassee, Florida 32399-7000 or the department’s Web site at: <http://elderaffairs.state.fl.us/english/forms/ALFCT001>.

(2) MONITORING. The department or its designee (hereafter referred to as “approval authority”) reserves the right to do the following:

(a) Attend and monitor core training courses;

(b) Review provider records and course materials pursuant to this rule; and

(c) Conduct on-site monitoring, follow-up monitoring, and require implementation of a corrective action plan if the provider does not adhere to the approved curriculum.

Rulemaking Authority 429.52 FS. Law Implemented 429.52 FS. History–New \_\_\_\_\_.

58T-1.207 ALF Core Training Provider Initial Registration Process.

(1) REGISTRATION PROCESS.

(a) Before core training can be conducted, an applicant must meet the training provider qualifications outlined in Section 429.52(9), F.S., and Rule 58T-1.203, F.A.C. Additionally, an applicant must register with, and obtain from, the approval authority a unique provider registration number as set forth in this subsection.

(b) An applicant must complete DOEA Form ALFCT-002, Application for Assisted Living Facility (ALF) Core Training Provider Registration, \_\_\_\_\_, 2009. The form is hereby incorporated by reference and may be obtained from the Department of Elder Affairs, Elder Housing Unit, 4040 Esplanade Way, Tallahassee, Florida 32399-7000 or the department's Web site at: <http://elderaffairs.state.fl.us/english/forms/DOEAformALFCT002>.

## (2) APPROVAL PROCESS.

Within 30 calendar days after receiving a core training provider application, the approval authority must submit written notification approving or denying the application, or requesting supplemental information or clarification.

(a) If the application is approved, the approval authority must include a unique provider registration number in the notice.

(b) If the application is denied, the approval authority must provide the reason or reasons for denial in the notice.

(c) If the application is determined to require supplemental information or clarification, the approval authority must state the supplemental information or clarification that is being requested.

1. If the approval authority does not receive the requested information within 30 calendar days of the request, the application will be deemed incomplete and closed.

2. If the approval authority receives the requested information within 30 calendar days of the request, the approval authority must process the training provider application within 30 calendar days after all required information is received.

Rulemaking Authority 429.52 FS. Law Implemented 429.52 FS. History—New \_\_\_\_\_.

## 58T-1.209 Process for Maintaining ALF Core Training Provider Registration.

### (1) MAINTAINING ALF CORE TRAINING PROVIDER REGISTRATION.

(a) After receiving the initial core training provider registration, the approved provider must re-register with the approval authority every 2 years by submitting documentation of his or her compliance with the continuing education requirement as specified in Section 429.52(4), F.S., and this rule.

(b) The provider must submit the documentation to the address referenced on DOEA Form ALFCT-001. It must be submitted no later than 30 calendar days after each two-year

continuing education cycle. The 2-year cycle begins on the date of the initial training provider registration. Documentation must include the following:

1. Title of the training program;

2. Subject matter of the training program;

3. The training program agenda including topics discussed;

4. The core training provider's name and registration number;

5. Date(s) of participation;

6. Number of hours of the training program; and

7. The continuing education training provider's name, signature, credentials, and professional license number, if applicable.

## (2) APPROVAL AUTHORITY PROCESS.

(a) Within 30 calendar days after receiving the required continuing education documentation, the approval authority must notify the provider in writing that the continuing education requirement:

1. Has been met; or

2. Has not been met and the reasons why; or

3. Has omissions or additional information is requested.

a. If the approval authority does not receive the omitted or additional information as requested within 30 calendar days of the request, the provider's registration shall be cancelled. The approval authority must provide written notification of its decision, including the reason for the cancellation, no later than 60 calendar days from the date of the original request.

b. If the approval authority receives the omitted or additional information as requested within the 30 calendar day time period, the approval authority must process the core training provider's registration within 30 calendar days after all required information is received. The approval authority must provide written notification to the provider of its decision.

(b) Failure to submit proof of the continuing education requirement as specified in this rule shall result in cancellation of the core training provider's registration. The approval authority must provide written notification of such action no later than 30 calendar days after the information was due.

(c) If the provider's registration is cancelled under paragraphs (a) and (b) of this subsection and the provider subsequently meets the continuing education requirement, he or she may re-apply for registration as specified in Rule 58T-1.207, F.A.C., and include documentation that the continuing education requirement has been met pursuant to this rule.

Rulemaking Authority 429.52 FS. Law Implemented 429.52 FS. History—New \_\_\_\_\_.

58T-1.211 Registered ALF Core Training Provider Responsibilities.

The following are the responsibilities of a registered core training provider:

(1) USE OF MINIMUM CORE TRAINING CURRICULUM. A registered core training provider is responsible for the following:

(a) Conducting core training using the minimum core training curriculum pursuant to Rule 58T-1.205, F.A.C.; and

(b) Ensuring that all changes in ALF statutes and rules are immediately incorporated into the contents of his or her core training curriculum.

(2) CERTIFICATES. After a trainee successfully completes core training, the approved training provider must issue a certificate to him or her. In addition to the provider's unique registration number, the certificate must include the information referenced in paragraph 58A-5.0191(11)(a), F.A.C. The provider's signature and registration number shall serve as documentation that the trainee has completed the required training.

(3) RECORDS. Approved providers must maintain records of each course taught for a minimum of 5 years. Course records must include the following information:

(a) The title of the training program;

(b) The agenda;

(c) The curriculum and any accompanying documentation and training aids;

(d) The training provider's name and registration number;

(e) The trainees' names, dates of participation and training location; and

(f) Training evaluations and roster signed by trainees.

(4) COMPETENCY EXAM.

(a) Approved training providers must submit the names of trainees completing core training to the testing authority within 10 calendar days after completion of the course. Names must be submitted to the following address: ALF Certification Testing, University of South Florida, 4202 E. Fowler Avenue, DAO199, Tampa, Florida 33620-8360. Names may be alternately submitted via e-mail to ALF@iirp.usf.edu.

(b) The testing authority shall not process any requests for the competency exam, nor sit any individual for the exam, unless proper notice is submitted by an approved training provider pursuant to paragraph (a) of this subsection.

(5) GUEST SPEAKERS. If a core training provider uses guest trainers to teach or participate in specific training modules covered in the minimum core training curriculum referenced in Rule 58T-1.205, F.A.C., the core trainer is responsible to ensure that the guest speaker meets the following minimum conditions:

(a) Has expertise in the specific subject matter; and

(b) Covers all components of the subject matter if he or she provides the module or portion of the module instruction.

Rulemaking Authority 429.52 FS. Law Implemented 429.52 FS. History-- New

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Jim Crochet

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: E. Douglas Beach, Ph.D., Secretary

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 3, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 19, 2008

**DEPARTMENT OF ENVIRONMENTAL PROTECTION**

Notices for the Department of Environmental Protection between December 28, 2001 and June 30, 2006, go to <http://www.dep.state.fl.us/> under the link or button titled "Official Notices."

**DEPARTMENT OF HEALTH**

**Board of Acupuncture**

RULE NO.: RULE TITLE:

64B1-4.001 Acupuncture Program Requirements

PURPOSE AND EFFECT: The Board proposes the rule amendment to update and clarify licensure requirements.

SUMMARY: The rule amendment will update and clarify licensure requirements.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined that small businesses would not be effected by this rule.

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

RULEMAKING AUTHORITY: 457.102, 457.104, 457.105 FS.

LAW IMPLEMENTED: 456.033, 457.102, 457.105 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: Kaye Howerton, Executive Director, Board of Acupuncture/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

**64B1-4.001 Acupuncture Program Requirements.**

In order to be certified to take the licensure examination or to be eligible for licensure by endorsement, the applicant must establish that he/she has met the following minimal requirements.

(1) For students enrolled in a program prior to August 1, 1997, applicants under this section must have completed at least 900 hours of supervised instruction in traditional oriental acupuncture and at least 600 hours of supervised clinical experience, as well as 20 hours of supervised instruction in Florida Statutes and Rules, including Chapters 456 and 457, F.S., and this rule chapter, which can be obtained through an approved continuing education program or in a program offered at an Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM) accredited or candidate oriental medicine school. All applicants under this provision must have started classes no later than February 1, 1998.

(2) Applicants who apply for licensure on or after August 1, 2001 must have completed a core curriculum comparable to that of the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM) master's level program in oriental medicine with a minimum of 2700 hours of supervised instruction:

(a) 15 hours of supervised instruction in universal precautions and 3 hours of HIV/AIDS that complies with the requirements of Section 456.033, F.S.; and

(b) 20 hours of supervised instruction in Florida Statutes and Rules, including Chapters 456 and 457, F.S., and this rule chapter.

(2)(3) All applicants, except those who demonstrate satisfaction and eligibility under the program requirements in subsection 64B1-4.001(1), F.A.C., must establish their successful completion of a core curriculum substantially equivalent to that of the ACAOM 4-year program. Applicants who apply for licensure on or after October 1, 2003 must have graduated from an ACAOM candidate or accredited 4-year master's level program or foreign equivalent in Oriental Medicine with a minimum of 2700 hours of supervised instruction and must have successfully completed:

(a) 15 hours of supervised instruction in universal precautions; and 3 hours of HIV/AIDS that complies with the requirements of Section 456.033, F.S.; and

(b) 20 hours of supervised instruction in Florida Statutes and Rules, including Chapters 456 and 457, F.S., and this rule chapter which may be obtained through an approved continuing education program or in a program offered at an ACAOM accredited or candidate oriental medicine school; and. For purposes of the Florida Statutes and Rules and HIV/Aids requirements imposed by this chapter for initial licensure, the term "supervised instruction" shall mean

instruction in a Board approved continuing education program or in a program offered at an ACAOM accredited oriental medicine school.

(c) An 8 hour program that incorporates the safe and beneficial use of laboratory test and imaging findings in the practice of acupuncture and oriental medicine.

(3) Applicants whose educational transcripts and other records come from educational institutions outside the United States, may wish to submit those records to a private U.S. Organization that specializes in interpretation of educational credentials. These organizations do more than just translate the records.

(4) For applicants who enroll on or after July 31, 2001, applicants must have completed an eight hour program that incorporates the safe and beneficial use of laboratory test and imaging findings in the practice of acupuncture and oriental medicine.

Rulemaking Specific Authority 456.033, 457.102, 457.104, 457.105 FS. Law Implemented 456.033, 457.102, 457.105(2)(b) FS. History—New 8-30-84, Formerly 21AA-4.01, Amended 7-20-88, 4-30-89, 9-19-89, 3-18-92, Formerly 21AA-4.001, 61F1-4.001, Amended 3-24-96, Formerly 59M-4.001, Amended 12-31-97, 11-1-99, 6-21-00, 4-3-01, 5-24-04, 10-11-04, 10-24-04, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Acupuncture

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Acupuncture

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 5, 2008

**DEPARTMENT OF HEALTH****Board of Acupuncture**

RULE NO.:

64B1-4.0011

RULE TITLE:

Documentation Necessary for  
Licensure Application

PURPOSE AND EFFECT: The Board proposes the rule amendment to adopt an application for initial licensure and to provide the web address where the application can be downloaded.

SUMMARY: The rule amendment will adopt an application for initial licensure and to provide the web where the application can be downloaded.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined that small businesses would not be affected by this rule.

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

RULEMAKING AUTHORITY: 457.104, 457.105 FS.

LAW IMPLEMENTED: 457.105 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: Kaye Howerton, Executive Director, Board of Acupuncture/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

64B1-4.0011 Documentation Necessary for Licensure Application.

(1) A properly completed application shall be submitted on Department of Health Form DH-MQA 1116-07/08, adopted and incorporated herein by reference as this Board's application and available on the web at [www.doh.state.fl.us/mqa](http://www.doh.state.fl.us/mqa). To complete the application attach the appropriate fees and supporting documents and submit it to the Board Office.

(1) through (2) renumbered (2) through (3) No change.

Rulemaking Specific Authority 457.104 FS. Law Implemented 457.105 FS. History--New 2-18-98, Amended 10-11-04,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Acupuncture

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Acupuncture

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 23, 2009

## DEPARTMENT OF HEALTH

### Board of Chiropractic

RULE NO.: 64B2-12.014  
RULE TITLE: Supervising Physician Application Fee

PURPOSE AND EFFECT: The Board proposes the rule amendment in order to provide for biennial renewal certification.

SUMMARY: Provision for biennial renewal certification will be added to the rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined the proposed rule will not have an impact on small business.

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

RULEMAKING AUTHORITY: 460.405, 460.4165(8) FS.

LAW IMPLEMENTED: 460.4165(8) 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: Joe Baker, Jr., Executive Director, Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3258

THE FULL TEXT OF THE PROPOSED RULE IS:

64B2-12.014 Supervising Physician Application Fee.

(1) No change.

(2) The fee for the biennial renewal certification ~~annual application~~ to supervise a certified chiropractic physician's assistant shall be one hundred dollars (\$100.00).

Rulemaking Specific Authority 460.405, 460.4165(8) FS. Law Implemented 460.4165(8) FS. History--New 10-15-92, Formerly 21D-12.014, 61F2-12.014, 59N-12.014, Amended\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Chiropractic Medicine

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Chiropractic Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 27, 2009

## DEPARTMENT OF HEALTH

### Board of Chiropractic

RULE NO.: 64B2-12.0155  
RULE TITLE: Fee for Registered Chiropractic Assistants

PURPOSE AND EFFECT: The Board proposes the rule amendment in order to incorporate application forms into the rule and to include additional fees in the rule.

SUMMARY: Application forms will be incorporated into the rule; additional fees will be added to the rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined the proposed rule will not have an impact on small business.

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

RULEMAKING AUTHORITY: 460.405, 460.4166 FS.

LAW IMPLEMENTED: 460.4166 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: Joe Baker, Jr., Executive Director, Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3258

THE FULL TEXT OF THE PROPOSED RULE IS:

64B2-12.0155 Fee for Registered Chiropractic Assistants.

(1) Any person desiring to become a registered chiropractic assistant (RCA) shall make application to the Board on board approved form DH-MQA 1150 (Rev 11/08), Application for Registered Chiropractic Assistant (RCA), which is hereby incorporated by reference, and may be obtained from the Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257, accompanied by the required fees.

(2) The initial registration fee for a registered chiropractic assistant shall be \$25.00.

(3) The biennial registration fee for a registered chiropractic physician shall be \$25.00.

(4) Any modification of the supervising chiropractic physician shall be made by application to the Board on board approved form DH-MQA 1162 (Rev 11/08), Application for Registered Chiropractic Assistant to Modify Supervisor (RCA), which is hereby incorporated by reference, and may be obtained from the Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257, accompanied by the required fees.

(5) The fee to modify the supervising chiropractic physician for a RCA shall be \$25.00.

Rulemaking Specific Authority 460.405, 460.4166 FS. Law Implemented 460.4166 FS. History--New 9-24-96, Formerly 59N-12.0155, Amended \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Chiropractic Medicine

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Chiropractic Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 27, 2009

## DEPARTMENT OF HEALTH

### Board of Chiropractic

RULE NO.: 64B2-12.022      RULE TITLE: Medical Faculty Certificate Fees

PURPOSE AND EFFECT: The Board proposes the rule amendment in order to incorporate the Medical Faculty Certificate application form into the rule.

SUMMARY: The Medical Faculty Certificate application form will be incorporated into the rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined the proposed rule will not have an impact on small business.

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

RULEMAKING AUTHORITY: 456.013(2), 460.405, 460.4062(1), (3) FS.

LAW IMPLEMENTED: 456.013(2), 460.4062(1), (3) 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: Joe Baker, Jr., Executive Director, Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3258

THE FULL TEXT OF THE PROPOSED RULE IS:

64B2-12.022 Medical Faculty Certificate Fees.

(1) Any chiropractic physician desiring to obtain a chiropractic medicine faculty certificate shall make application to the Board on board approved form DH-MQA 1146, (Rev 11/08), Application for Chiropractic Medical Faculty Certificate which is hereby incorporated by reference, and may be obtained from the Board of Chiropractic Medicine, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3257, accompanied by the required fees, forms provided by the Board

~~(2)(1)~~ The application fee shall be \$100.00.

~~(3)(2)~~ The initial license fee shall be \$100.00.

~~(4)(3)~~ The fee for biennial renewal of a medical faculty certificate shall be \$100.00.

Rulemaking Specific Authority 456.013(2), 460.405, 460.4062(1), (3) FS. Law Implemented 456.013(2), 460.4062(1), (3) FS. History--New 12-4-07, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Chiropractic Medicine

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Chiropractic Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 27, 2009

**DEPARTMENT OF HEALTH**

**Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling**

RULE NOS.:	RULE TITLES:
64B4-3.001	Application for Licensure as a Clinical Social Worker, Marriage and Family Therapist or Mental Health Counselor
64B4-3.0015	Verification of Supervised Experience for Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling Applicants
64B4-3.007	Provisional Licensure
64B4-3.0085	Intern Registration
64B4-3.009	Limited Licenses
64B4-3.010	Marriage and Family Therapy Dual Licensure

**PURPOSE AND EFFECT:** The Board proposes the rule amendments and rule promulgations in order to incorporate application forms into the rules and to provide the rule references for the application and licensure fees.

**SUMMARY:** Application forms will be incorporated into the rules; rule references for the application and licensure fees will be provided.

**SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS:** No Statement of Estimated Regulatory Cost was prepared. The Board determined the proposed rules will not have an impact on small business.

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

**RULEMAKING AUTHORITY:** 456.015, 490.004(5) FS.

**LAW IMPLEMENTED:** 456.015, 491.005(1)(c), (3)(c), (4)(c), 491.006, 491.0046, 491.0057 FS.

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

**THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS:** Sue Foster, Executive Director, Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling/MQA, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258

**THE FULL TEXT OF THE PROPOSED RULE IS:**

64B4-3.001 Application for Licensure as a Clinical Social Worker, Marriage and Family Therapist or Mental Health Counselor ~~Verification of Supervised Experience for Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling Applicants~~

(4) Every applicant for licensure as a clinical social worker, marriage and family therapist or mental health counselor shall submit to the Board a completed application on Form DH-MQA 1174, Application for Licensure (revised 1/09), hereby adopted and incorporated by reference, which can be obtained from the Board's website at [www.doh.state.fl.us/mqa/491](http://www.doh.state.fl.us/mqa/491) verify the required supervised experience with a form entitled Application for Licensure supplied by the Department and completed and signed by the applicant's supervisor. The application shall be accompanied with the application fee and the initial licensure fee.

(1) An application for licensure by examination shall be accompanied with the application fee and the initial active status license fee specified in Rule 64B4-4.002, F.A.C.

(2) An application for licensure by endorsement shall be accompanied with the application fee specified in Rule 64B4-4.003, F.A.C., and the initial active status license fee specified in Rule 64B4-4.002, F.A.C. Applicants for licensure in Clinical Social Work, Marriage and Family Therapy or Mental Health Counseling who cannot provide verification by the methods above will be reviewed on an individual basis as to the sufficiency of alternative verification.

Rulemaking Specific Authority 491.004(5) FS. Law Implemented 491.005(1)(e), (3)(e), (4)(e), 491.006 FS. History—New 7-6-88, Amended 1-28-91, 11-3-92, Formerly 21CC-3.001, 61F4-3.001, Amended 11-13-96, Formerly 59P-3.001, Amended \_\_\_\_\_.

64B4-3.0015 Verification of Supervised Experience for Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling Applicants.

(1) Every applicant for licensure by examination as a clinical social worker, marriage and family therapist or mental health counselor shall verify the required supervised experience on Form DH-MQA 1181, Supervised Experience Attestation Form (Revised 1/09), which is hereby adopted and incorporated by reference and is available from the Board's website at [www.doh.state.fl.us/mqa/491](http://www.doh.state.fl.us/mqa/491). This form is to be completed and signed by the applicant's supervisor.

(2) Applicants for licensure in Clinical Social Work, Marriage and Family Therapy or Mental Health Counseling who cannot provide verification by the methods above will be reviewed on an individual basis as to the sufficiency of alternative verification.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.005(1)(c), (3)(c), (4)(c) FS. History—New \_\_\_\_\_.

64B4-3.007 Provisional Licensure.

(1) An applicant for licensure by examination or endorsement who intends to practice in Florida while satisfying coursework or examination requirements for licensure must be provisionally licensed in the profession for which he or she is seeking licensure prior to beginning practice.

(2) An applicant seeking a provisional license must submit a completed application to the Board on Form DH-MQA 1176, Provisional License Application (Revised 1/09), hereby adopted and incorporated by reference, which can be obtained from the Board's website at [www.doh.state.fl.us/mqa/491](http://www.doh.state.fl.us/mqa/491). The application shall be accompanied by the application fee specified in Rule 64B4-4.014, F.A.C., which is non-refundable.

(3) A provisional license shall be valid for a twenty-four (24) month period after the license is issued and and may not be renewed or reissued.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.0046 FS. History--New \_\_\_\_\_.

64B4-3.0085 Intern Registration.

An individual who intends to practice in Florida to satisfy the post-master's experience must register as an intern by submitting a completed application to the Board on Form DH-MQA 1175, Intern Registration Application (Revised 1/09), hereby adopted and incorporated by reference, which can be obtained from the Board's website at [www.doh.state.fl.us/mqa/491](http://www.doh.state.fl.us/mqa/491). The application shall be accompanied by the application fee specified in Rule 64B4-4.015, F.A.C., which is non-refundable.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.0045 FS. History--New \_\_\_\_\_.

64B4-3.009 Limited Licenses.

(1) No change.

(2) Any person desiring to obtain a limited license shall submit a completed application to the Board on Form DH-MQA 1178, Application for Limited Licensure (Revised 1/09, hereby adopted and incorporated by reference, which can be obtained from the Board's website at [www.doh.state.fl.us/mqa/491](http://www.doh.state.fl.us/mqa/491). The application shall be accompanied by the documents required by Section 456.015(2), F.S., and a fee of \$25 unless the applicant provides a notarized statement from the employer stating that the applicant will not receive monetary compensation for service involving the practice of his profession.

Rulemaking Specific Authority 456.015 FS. Law Implemented 456.015 FS. History--New 11-13-96, Formerly 59P-3.009, Amended \_\_\_\_\_.

64B4-3.010 Marriage and Family Therapy Dual Licensure.

Any psychologist licensed under chapter 490 or clinical social worker or mental health counselor licensed under this chapter desiring to obtain licensure as a marriage and family therapist shall submit a completed application to the Board on Form DH-MQA 1177, Marriage and Family Therapy Dual Licensure Application (Revised 1/09), hereby adopted and incorporated by reference, which can be obtained from the Board's website at [www.doh.state.fl.us/mqa/491](http://www.doh.state.fl.us/mqa/491). The application shall be accompanied with the application fee and the initial active status license fee specified in Rule 64B4-4.002, F.A.C.

Rulemaking Authority 491.004(5) FS. Law Implemented 491.0057 FS. History--New \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: January 29, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 13, 2009

**DEPARTMENT OF HEALTH****Board of Medicine**

RULE NO.:	RULE TITLE:
64B8-1.007	List of Approved Forms; Incorporation

PURPOSE AND EFFECT: The proposed rule amendments are intended to address the revised Physician Assistant and Anesthesiologist Assistant application forms for licensure.

SUMMARY: The proposed rule amendments incorporate the revised application forms into the forms rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board has determined that the proposed rule amendments will not have an impact on small business.

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



RULEMAKING AUTHORITY: 120.55(1)(a), (4), 456.013, 456.036(5), 456.048(1), 458.309, 458.311, 458.312(4), 458.313(4), 458.314(5), 458.315(2), 458.320(8), 458.321(2), 458.347(13), 458.3475, 458.351(6) FS.

LAW IMPLEMENTED: 456.013, 456.035, 456.036, 456.048, 456.073, 458.309, 458.311, 458.312, 458.313, 458.314, 458.315, 458.316, 458.317, 458.319, 458.320, 458.321, 458.345, 458.347, 458.3475, 458.348, 458.351, 465.0276 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: Larry McPherson, Jr., Executive Director, Board of Medicine/MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253

THE FULL TEXT OF THE PROPOSED RULE IS:

64B8-1.007 List of Approved Forms; Incorporation.

The following forms used by the Board in its dealings with the public are listed as follows and are hereby adopted and incorporated by reference, and can be obtained from the Board office by writing to the Board of Medicine, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-1753, or by telephoning (850)245-4131.

(1) through (16) No change.

(17) DH-MQA 1087, entitled "Application for Licensure as an Anesthesiologist Assistant," (1/09) ~~(10/06)~~.

(18) through (21) No change.

(22) DH-MQA 2000, entitled "Application for Licensure as a Physician Assistant," (1/09) ~~(12/06)~~.

(23) through (25) No change.

Rulemaking Specific Authority 456.013, 456.036(5), 456.048(1), 458.309, 458.311, 458.312(4), 458.313(4), 458.314(5), 458.315(2), 458.320(8), 458.321(2), 458.347(13), 458.3475, 458.351(6) FS. Law Implemented 456.013, 456.035, 456.036, 456.048, 456.073, 458.309, 458.311, 458.312, 458.313, 458.314(5), 458.315, 458.316, 458.317, 458.319, 458.320, 458.321, 458.345, 458.347, 458.3475, 458.348, 458.351, 465.0276 FS. History—New 4-17-01, Amended 11-20-01, 8-13-02, 11-10-02, 3-19-03, 6-4-03, 11-17-03, 4-19-04, 1-31-05, 9-29-05, 6-29-06, 12-26-06, 4-2-07, 6-25-08, 1-18-09, 3-17-09, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Council on Physician Assistants and Anesthesiologist Assistant Committee, Board of Medicine

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 7, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 20, 2009

## DEPARTMENT OF HEALTH

### Board of Medicine

RULE NO.:

RULE TITLE:

64B8-30.003

Physician Assistant Licensure

PURPOSE AND EFFECT: The proposed rule amendment is intended to incorporate the revised application for licensure as a physician assistant in the application rule.

SUMMARY: The proposed rule amendment incorporates the revised application for licensure as a physician assistant in the application rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board has determined that the proposed rule amendments will not have an impact on small business.

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

RULEMAKING AUTHORITY: 456.013, 456.031(2), 456.033(6), 458.309, 458.347 FS.

LAW IMPLEMENTED: 456.013, 456.017, 456.031, 456.033, 458.347 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: Larry McPherson, Jr., Executive Director, Board of Medicine/MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253

THE FULL TEXT OF THE PROPOSED RULE IS:

64B8-30.003 Physician Assistant Licensure.

(1) Requirements for Licensure. All applicants for licensure as physician assistants shall submit an application to the Department ~~on forms approved by the Council and Boards and provided by the Department.~~ The application shall be made on Form DH-MQA 2000 (revised 1/09), hereby adopted and incorporated by reference, and can be obtained from the Board of Medicine's website at <http://www.doh.state.fl.us/mqa/PhysAsst/index.html>. The applicant must meet all of the requirements of Section 458.347(7) or 459.022(7), F.S., and the applicant must submit two personalized and individualized letters of recommendation from physicians. Letters of recommendation must be composed and signed by the applicant's supervising physician, or, for recent graduates, the preceptor physician, and give details of the applicant's clinical skills and ability. Each letter must be addressed to and directed to the Council on Physician Assistants and must have been written no more than six months prior to the filing of the application.

(2) through (5) No change.

Rulemaking Specific Authority 456.013, 456.031(2), 456.033(6), 458.309, 458.347 FS. Law Implemented 456.013, 456.017, 456.031, 456.033, 458.347 FS. History—New 4-28-76, Amended 11-15-78, 10-23-80, 12-4-85, Formerly 21M-17.03, Amended 5-13-87, 11-15-88, 11-15-90, 1-9-92, 5-6-93, Formerly 21M-17.003, Amended 9-21-93, Formerly 61F6-17.003, Amended 9-8-94, 11-30-94, 10-25-95, 3-25-96, Formerly 59R-30.003, Amended 6-7-98, 8-19-99, 5-28-00, 3-3-02, 5-19-03, 10-19-03, 11-17-03, 9-5-05, 12-12-05, 10-30-06, 2-25-07, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Council on Physician Assistants

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 7, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 30, 2009

## DEPARTMENT OF HEALTH

### Board of Medicine

RULE NO.: 64B8-31.003	RULE TITLE: Application for Licensure and Licensure Requirements for Anesthesiologist Assistants
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PURPOSE AND EFFECT: The proposed rule amendment is intended to incorporate the revised application form for anesthesiologist assistants.

SUMMARY: The proposed rule amendment incorporates the revised application form for anesthesiologist assistants.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board has determined that the proposed rule amendments will not have an impact on small business.

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

RULEMAKING AUTHORITY: 458.309, 458.3475 FS.

LAW IMPLEMENTED: 456.013(7), 456.031, 456.033, 458.3475 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: Larry McPherson, Executive Director, Board of Medicine/MQA, 4052 Bald Cypress Way, Bin #C03, Tallahassee, Florida 32399-3253

THE FULL TEXT OF THE PROPOSED RULE IS:

64B8-31.003 Application for Licensure and Licensure Requirements for Anesthesiologist Assistants.

(1) Application for Licensure.

(a) All persons applying for licensure as an anesthesiologist assistant shall submit an application to the Department on forms approved by Boards and provided by the Department. The application shall be made on Form DH-MQA 1087 (revised 1/09), hereby adopted and incorporated by reference, and can be obtained from the Board of Medicine's website at [http://www.doh.state.fl.us/mqa/Anes/aa\\_applicant.html](http://www.doh.state.fl.us/mqa/Anes/aa_applicant.html).

(b) through (c) No change.

(2) through (3) No change.

Rulemaking Specific Authority 458.309, 458.3475 FS. Law Implemented 456.013(7), 456.031, 456.033, 458.3475 FS. History—New 8-2-05, Amended \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Anesthesiologist Assistant Committee

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 7, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 30, 2009

## DEPARTMENT OF HEALTH

### Board of Nursing

RULE NO.: 64B9-3.014	RULE TITLE: Graduates From Foreign or Non-NCSBN Jurisdictions
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PURPOSE AND EFFECT: The purpose and effect is to revise the rule title and to set forth the minimum education requirements applicable to applicants from non-Board approved nursing programs.

SUMMARY: The minimum education requirements applicable to applicants from non-Board approved nursing programs are set forth.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: The Board has determined that the proposed rule will not have an impact on small business. No Statement of Estimated Regulatory Cost was prepared.

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

RULEMAKING AUTHORITY: 464.006 FS.

LAW IMPLEMENTED: 456.013(1), 464.008 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: Rick Garcia, Executive Director, Board of Nursing, 4052 Bald Cypress Way, Bin #C07, Tallahassee, Florida 32399-3259

THE FULL TEXT OF THE PROPOSED RULE IS:

64B9-3.014 Graduates From Foreign or Non-NCSBN Jurisdictions Criteria for Credentialing Agencies.

~~In order to be accepted as documentation of the required education, a report must be submitted from a credentialing agency to the Board of Nursing that meets the following criteria:~~

~~(1) Graduates of foreign nursing programs or nursing programs in jurisdictions which are not members of the National Council of State Boards of Nursing (NCSBN) must submit an evaluation from a credentialing agency approved by the Board.~~

~~(2) Approved credentialing agencies must meet the following criteria:~~

~~(a)(1) The credentialing agency must be a member of a national credentialing organization that sets performance standards for the industry, and must adhere to those standards.~~

~~(b)(2) The credentialing agency's standards must be monitored by an external committee of credentialing experts and nursing educators.~~

~~(c)(3) The credentialing agency must demonstrate the ability to accurately analyze academic and licensure credentials in terms of U.S. comparability, with course-by-course analysis for nursing academic records.~~

~~(d)(4) The credentialing agency must manage the translation of original documents into English.~~

~~(e)(5) The credentialing agency will inform the Board of Nursing in the event applicant documents are found to be fraudulent.~~

~~(f)(6) The credentialing agency must have been in the business of evaluating nursing education for a minimum of 10 years.~~

~~(3)(7) Credentials evaluation report.~~

~~(a) through (e) No change.~~

~~(4) In order for the applicant to meet the educational requirements of Section 464.008, F.S., the credentials report and transcripts must include all courses set forth in Rules 64B9-2.006 and 64B9-2.015, F.A.C., and must demonstrate, at a minimum, the following hours of theoretical and clinical instruction:~~

~~(a) Registered nursing programs:~~

~~1. 144 theory hours and 341 clinical hours in medical nursing;~~

~~2. 91 theory hours and 294 clinical hours clinical hours in surgical nursing;~~

~~3. 32 theory hours and 87 clinical hours in obstetrical nursing;~~

~~4. 32 theory hours and 84 clinical hours in pediatric nursing;~~

~~5. 30 theory hours and 51 clinical hours in psychiatric/mental health nursing; and~~

6. 16 theory hours and 18 clinical hours in community/public health nursing.

(b) Practical nursing programs:

1. 131 theory hours and 216 clinical hours in medical nursing;

2. 82 theory hours and 186 clinical hours in surgical nursing;

3. 34 theory hours and 46 hours in obstetrics nursing; and

4. 30 theory hours and 42 clinical hours in pediatrics nursing.

Rulemaking Specific Authority 464.006 FS. Law Implemented 456.013(1), 464.008 FS. History--New 4-19-00, Amended 10-22-07.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Nursing

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Nursing

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 27, 2009

**DEPARTMENT OF HEALTH**

**Board of Osteopathic Medicine**

RULE NO.: RULE TITLE:

64B15-6.003 Physician Assistant Licensure

PURPOSE AND EFFECT: The proposed rule amendment is intended to incorporate the revised application for licensure as a physician assistant in the application rule.

SUMMARY: The proposed rule amendment incorporates the revised application for licensure as a physician assistant in the application rule.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board has determined that the proposed rule amendments will not have an impact on small business.

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

RULEMAKING AUTHORITY: 458.347(7), 459.005, 459.022 FS.

LAW IMPLEMENTED: 456.013, 456.031, 456.033, 459.022 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: Kaye Howerton, Executive Director, Board of Osteopathic Medicine/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

**64B15-6.003 Physician Assistant Licensure.**

(1) Requirements for Licensure. All applicants for licensure as physician assistants shall submit an application to the Department ~~on forms approved by the Council and Boards and provided by the Department. The application shall be made on Form DH-MQA 2000 (revised 1/09), hereby adopted and incorporated by reference, and can be obtained from the Board of Medicine's website at <http://www.doh.state.fl.us/mqa/PhysAsst/index.html>.~~ The applicant must meet all of the requirements of Section 458.347(7) or 459.022(7), F.S., and the applicant must submit two personalized and individualized letters of recommendation from physicians. Letters of recommendation must be composed and signed by the applicant's supervising physician, or, for recent graduates, the preceptor physician, and give details of the applicant's clinical skills and ability. Each letter must be addressed to and directed to the Council on Physician Assistants and must have been written no more than six months prior to the filing of the application.

(2) through (5) No change.

Rulemaking Specific Authority 458.347(7), 459.005, 459.022 FS. Law Implemented ~~420.53(1)(a),~~ 456.013, 456.031, 456.033, 459.022 FS. History—New 10-18-77, Formerly 21R-6.03, Amended 10-28-87, 4-21-88, 4-18-89, 9-26-90, 5-20-91, 10-28-91, 3-16-92, Formerly 21R-6.003, Amended 11-4-93, 3-29-94, Formerly 61F9-6.003, Amended 2-1-95, Formerly 59W-6.003, Amended 6-7-98, 3-10-02, 2-23-04, 10-30-06, 2-25-07, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Council on Physician Assistants

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Osteopathic Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 7, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 30, 2009

**DEPARTMENT OF HEALTH**

**Board of Osteopathic Medicine**

RULE NO.:	RULE TITLE:
64B15-7.003	Application for Licensure and Licensure Requirements for Anesthesiologist Assistants

PURPOSE AND EFFECT: The proposed rule amendment is intended to incorporate the revised application form for anesthesiologist assistants.

SUMMARY: The proposed rule amendment incorporates the revised application form for anesthesiologist assistants.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board has determined that the proposed rule amendments will not have an impact on small business.

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

RULEMAKING AUTHORITY: 459.023, 459.005 FS.

LAW IMPLEMENTED: 459.023, 456.013(7), 456.031, 456.033 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: Kaye Howerton, Executive Director, Board of Osteopathic Medicine/MQA, 4052 Bald Cypress Way, Bin #C06, Tallahassee, Florida 32399-3256

THE FULL TEXT OF THE PROPOSED RULE IS:

**64B15-7.003 Application for Licensure and Licensure Requirements for Anesthesiologist Assistants.**

(1) Application for Licensure.

(a) All persons applying for licensure as an anesthesiologist assistant shall submit an application to the Department ~~on forms approved by Boards and provided by the Department. The application shall be made on Form DH-MQA 1087 (revised 1/09), hereby adopted and incorporated by reference, and can be obtained from the Board of Medicine's website at: [http://www.doh.state.fl.us/mqa/Anes/aa\\_applicant.html](http://www.doh.state.fl.us/mqa/Anes/aa_applicant.html).~~

(b) through (c) No change.

(2) through (3) No change.

Rulemaking Specific Authority 459.023, 459.005 FS. Law Implemented 459.023, 456.013(7), 456.031, 456.033 FS. History—New 8-2-05, Amended \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Anesthesiologist Assistant Committee

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Osteopathic Medicine

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: February 7, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: January 30, 2009

**DEPARTMENT OF HEALTH****Board of Speech-Language Pathology and Audiology**

RULE NO.: RULE TITLE:

64B20-7.004 Citations

PURPOSE AND EFFECT: The purpose and effect is to add violations for which citations may be issued.

SUMMARY: Violations for which citations may be issued are added.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: A Statement of Estimated Regulatory Cost was prepared. The proposed changes will impact individual licensees that are issued citations by the department. These licensees may or may not be part of a small business.

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

RULEMAKING AUTHORITY: 456.073, 456.077 FS.

LAW IMPLEMENTED: 456.077, 468.1295 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: Kaye Howerton, Executive Director, Board of Speech-Language Pathology and Audiology, 4052 Bald Cypress Way, Bin #06, Tallahassee, Florida 32399-3253

## THE FULL TEXT OF THE PROPOSED RULE IS:

64B20-7.004 Citations.

(1) through (2) No change.

(3) The following violations with accompanying fines may be disposed of by citation:

(a) Practice on an inactive license or certificate for less than six months. The fine shall be \$125 ~~50~~ for each month or fraction thereof of practice within a maximum fine of \$750 for each violation. (See Section 468.1295(1)(h), F.S.)

(b) Falsely certifying compliance with continuing education hours required for renewal of licensure or certification. The fine shall be \$1,000. (See Section 468.1295(1)(d), F.S.)

(c) Failure to submit to the board on an annual basis certification of testing and calibration of equipment. The fine shall be \$1,000 ~~250~~. (See Section 468.1295(1)(u), F.S.)(d) Failure to maintain and have available for inspection by the Agency certifications for the testing and calibration of any audiometric testing equipment designated by the Board covering the current year. The fine shall be \$500 ~~250~~. (See Rule 64B20-8.001, F.A.C.; Section 468.1295(1)(k), F.S.)(e) Failure to identify the type of license under which the practitioner is practicing. The fine shall be \$500 ~~250~~. (See Section 456.072(1)(t), F.S.)

(4) through (7) No change.

~~Rulemaking Specific~~ Authority 456.073, 456.077 FS. Law Implemented 456.077, 468.1295 FS. History—New 2-12-92, Amended 8-24-92, 11-9-92, Formerly 21LL-7.004, 61F14-7.004, 59BB-7.004, Amended 8-9-04, 8-28-07, \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Board of Speech Language Pathology and Audiology

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Board of Speech Language Pathology and Audiology

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: May 14, 2008

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: July 18, 2008

**DEPARTMENT OF HEALTH****Dental Laboratories**

RULE NO.: RULE TITLE:

64B27-1.003 Continuing Education Requirements

PURPOSE AND EFFECT: To create a rule to implement new 2008 Session legislation relating to dental laboratories and the completion of continuing education biennially.

SUMMARY: This rule specifies courses to be taken by the owner/operator or a designated employee of a dental laboratory to satisfy the requirement of 18 hours biennially, submission of information into the department's tracking system, and what information should be retained to establish compliance.

SUMMARY: This rule specifies courses to be taken by the owner/operator or a designated employee of a dental laboratory to satisfy the requirement of 18 hours biennially, submission of information into the department's tracking system, and what information should be retained to establish compliance.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: A Statement of Estimated Regulatory Cost was prepared even though the costs to the dental laboratories are not increased by the rule. The statement provides a good faith estimate of the number of individuals and entities likely to be affected, the likely costs per course, and the impact of the rule on mitigating costs.

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

RULEMAKING AUTHORITY: 466.032, 466.038 FS.

LAW IMPLEMENTED: 456.013, 466.032 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Sue Foster, Division of Medical Quality Assurance, 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399-3258

## THE FULL TEXT OF THE PROPOSED RULE IS:

64B27-1.003 Continuing Education Requirements.

(1) On or after July 1, 2010, each registered dental laboratory owner/operator or a designated employee must complete 18 hours of continuing education (CE) biennially. The owner/operator or agent as listed on the registration has the responsibility to ensure that the CE provider has submitted or the owner has self-submitted course completion information within the CE tracking system in accordance with rule Chapter 64B-5, F.A.C. The records retained by the laboratory to document completion of the required CE shall either include evidence that the owner/operator completed the course hours or that the course hours were completed by a designated employee who worked at the laboratory for at least one full year during the biennium as documented by time cards, pay stubs, or federal W-2 forms.

(2) Organizations, schools, and agencies that meet the criteria set in Section 466.032, Florida Statutes, and in this rule shall apply and will be granted approval to develop and offer continuing education courses in accordance with Rule 64B5-12.017, F.A.C.

(3) As part of the hours required biennially, the owner/operator or designated employee must complete two hours of coursework relating to the prevention of medical errors including root-cause analysis, error reduction and prevention, patient safety, infection control, and/or standards on employee safety required by state or federal laws or regulations.

(4) As part of the hours required biennially, the owner/operator or designated employee must complete a one to three hour course on the laws and rules that govern dental laboratories and dental technicians.

(5) Attendance at lectures, study clubs, college courses, conventions, and research shall be included for fulfillment of the CE requirement if sponsored for dentists or dental technicians by an approved provider or if approved by the executive director for dental laboratories and the Board of Dentistry as meeting the content requirements specified by law. For an up-to-date report on approved providers contact the office regulating dental laboratories at 4052 Bald Cypress Way, Bin #C08, Tallahassee, Florida 32399, telephone number (850)245-4474.

(6) As part of the hours required biennially, the owner/operator or designated employee may satisfy up to four hours by the performance of pro bono services to the indigent or to underserved populations or in areas of critical need provided that the prescribing dentist is serving these populations and the patient beneficiary falls within one of these categories.

(7) The CE requirement does not apply to a dental laboratory physically located within the office of a licensed dentist.

Rulemaking Authority 466.032, 466.038 FS. Law Implemented 456.013, 466.032 FS. History--New

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Sue Foster

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Ana M. Viamonte Ros, M.D. M.P.H.

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: September 12, 2008

**DEPARTMENT OF HEALTH****Board of Respiratory Care**

RULE NO.: RULE TITLE:

64B32-2.001 License by Endorsement

PURPOSE AND EFFECT: The Board proposes the rule amendment to add new language to clarify the form name and number for licensure by endorsement for a registered respiratory therapist or certified respiratory therapist.

SUMMARY: The rule amendment will add new language to clarify the form name and number for licensure by endorsement for a registered respiratory therapist or certified respiratory therapist.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: No Statement of Estimated Regulatory Cost was prepared. The Board determined that small businesses would not be effected by this rule.

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

RULEMAKING AUTHORITY: 468.353(1), 468.358(3) FS.

LAW IMPLEMENTED: 468.358(2), (3), 468.365 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: Allen Hall, Executive Director, Board of Respiratory Care Specialist/MQA, 4052 Bald Cypress Way, Bin #C05, Tallahassee, Florida 32399-3255

## THE FULL TEXT OF THE PROPOSED RULE IS:

64B32-2.001 License by Endorsement.

(1) Applicants for licensure as a Registered Respiratory Therapist or Certified Respiratory Therapist in the state of Florida shall apply on Form DH-MQA 1145, Application by Endorsement, Revised 1/09, incorporated herein as this Board's application form and available on the web at <http://www.doh.state.fl.us/mqa/respiratory/index.html>.

(2)(1) No change.

(3)(2) No change.

Rulemaking Specific Authority 468.353(1), 468.358(3) FS. Law Implemented 468.358(2), (3), 468.365 FS. History—New 4-29-85, Formerly 21M-34.02, 21M-34.002, 61F6-34.002, 59R-71.002, 64B8-71.002, Amended 7-22-02, 8-28-05, 6-12-07, 5-15-08,\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Board of Respiratory Care Specialist  
NAME OF AGENCY HEAD WHO APPROVED THE  
PROPOSED RULE: Board of Respiratory Care Specialist  
DATE PROPOSED RULE APPROVED BY AGENCY  
HEAD: January 9, 2009  
DATE NOTICE OF PROPOSED RULE DEVELOPMENT  
PUBLISHED IN FAW: December 26, 2008

## DEPARTMENT OF HEALTH

### Division of Family Health Services

RULE NOS.:	RULE TITLES:
64F-9.001	Definitions
64F-9.002	Scope of Services
64F-9.003	Direct Client Services Administration
64F-9.004	Epilepsy Services Program Prevention and Education Services
64F-9.005	Epilepsy Services Program Reporting Requirements

PURPOSE AND EFFECT: The Department proposes to amend the existing language in this chapter.

SUMMARY: Each rule was updated to recognize changes in definitions or terminology and modifying the eligibility and enrollment process.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS: A Statement of Estimated Regulatory Cost was prepared and changes to the rules have no effects on the costs related to the rules.

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

RULEMAKING AUTHORITY: 385.207(4) FS.

LAW IMPLEMENTED: 385.207 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULES IS: Melba Hawkins-Littles, 4052 Bald Cypress Way, Bin A-18, Tallahassee, Florida 32399

THE FULL TEXT OF THE PROPOSED RULES IS:

(Substantial rewording of Rule 64F-9.001 follows. See Florida Administrative Code for present text.)

### 64F-9.001 Definitions.

The following words and phrases shall have the following meanings for the purpose of this rule.

(1) “Epilepsy Services Program (ESP)” means a program that provides direct client services, prevention and education services according to Section 385.207, F.S., to improve access to health care services for Florida’s citizens living with epilepsy.

(2) “ESP Client” means a person who is both a resident of Florida and who either:

(a) Is suspected to have a seizure disorder or epilepsy and has applied for direct client services; or

(b) Is an ESP client, enrolled in a prior year, and is receiving continuing case management services as defined above; or

(c) Has a confirmed diagnosis of epilepsy and is receiving direct client services.

(3) “Family” means one or more persons living in one dwelling place who are related by blood, marriage, law or conception. A pregnant woman and her unborn child or children are considered to be two or more family members. A single adult, over 18, living with relatives is considered to be a separate family for income eligibility determination purposes. If the dwelling place includes more than one family or more than one unrelated individual, the poverty guidelines are applied separately to each family or unrelated individual and not the dwelling place as a whole.

(4) “Gross Family Income” means the sum of gross income available to a family at the time of application. Gross family income shall be based on all gross income to be earned, unearned, received or anticipated to be earned or received in the current month. Providers are permitted to request income for up to 12 months prior to the date of application if the income received in the current month is not representative of the family’s gross income due to seasonal employment and if it is to the client’s benefit to do so. Income shall include the following:

(a) Wages, salary and self-employment income;

(b) Child support received;

(c) Alimony received;

(d) Unemployment compensation;

(e) Worker’s compensation;

(f) Veteran’s pension;

(g) Social Security;

(h) Pensions or annuities;

(i) Dividends, interest on savings or bonds;

(j) Income from estates or trusts;

(k) Net rental income or royalties;

(l) Net income from self employment;

(m) Contributions; and

(n) Temporary Assistance for Needy Families (TANF)

(5) "Net Income" means gross family income minus Federal Tax Withholdings, Social Security and Medicare deductions.

(6) "Plan of Care (POC)" is an individualized plan relating to the client's needs, goals, and expected outcomes to the services. A POC is created during the intake process and is updated as necessary. The POC is reviewed at least annually to assure the client is on target with the stated goals and objectives.

(7) "Provider" an organization or individual providing services or commodities to the department or its assignee in accordance with the terms of a contract.

(8) "Poverty Guidelines" The guidelines are a simplified version of the federal poverty threshold used for administrative purposes to establish income ranges of the sliding fee scale to determine financial eligibility for medical services. The guidelines are updated annually based on the increase in the Consumer Price Index as shown in the Federal Registrar by the Department of Health and Human Services. The Program Eligibility Annual Income Guidelines as disseminated by the Department of Health are used to determine eligibility for the ESP and Antiepileptic Drug Program and are based on gross income.

(9) "Sliding Fee Scale" means a scale of charges which are less than the full cost of the service that clients shall be charged for ESP services. The fee scale for these services shall progress in increments of the full cost of services for those clients between 100 and 200 percent of the most current poverty guidelines published by the Federal Office of Management and Budget.

Rulemaking Specific Authority 385.207(4) FS. Law Implemented 385.207, 402.166, 402.165, 402.167, 39 FS. History--New 11-1-92, Amended 4-29-96, Formerly 10D-117.003, Amended \_\_\_\_\_.

(Substantial rewording of Rule 64F-9.002 follows. See Florida Administrative Code for present text)

64F-9.002 Scope of Services Eligibility for ESP Services.  
The ESP includes the following programs:

(1) Direct Client Services: A statewide program will be maintained to improve access, provide care and assistance to persons with epilepsy through the delivery of a comprehensive range of services that will have a positive effect on the quality of life. Services include client guidance, eligibility determination, case management, and service referrals.

(2) Prevention and Education: A statewide prevention and education program will be maintained to reduce the stigma associated with epilepsy, increase knowledge and understanding of epilepsy. Services include awareness activities, educational seminars, and presentations to various target groups to promote the early recognition, treatment, and prevention of epilepsy.

Rulemaking Specific Authority 385.207(4) FS. Law Implemented 385.207, 402.33 FS. History--New 11-1-92, Amended 5-5-94, 4-29-96, Formerly 10D-117.006, Amended \_\_\_\_\_.

(Substantial rewording of Rule 64F-9.003 follows. See Florida Administrative Code for present text)

64F-9.003 Direct Client Services Administration  
Individual Action Plan (IAP):

(1) Eligibility: An individual is eligible for the ESP – Direct Client Services Program if:

(a) He or she is a Florida resident;

(b) He or she is diagnosed or suspected of having a seizure disorder or epilepsy; and

(c) He or she cooperates in establishing eligibility, including providing the information necessary to complete the Application for Services Form and the Financial Worksheet. The provider determines that the individual has met all eligibility criteria and assesses the eligibility of clients annually. An individual shall be ineligible and not enrolled in the ESP program if he or she does not meet the aforementioned criteria.

(2) Enrollment: If eligible for the ESP program, the provider shall enroll the individual as an ESP client in the program and will complete, distribute and discuss the following forms:

(a) Application for service;

(b) Financial worksheet;

(c) Client Right and Responsibilities;

(d) Grievance Form;

(e) Health Insurance Portability and Accountability Act (HIPAA) forms.

(3) Fee Assessment: There are no fees established for epilepsy case management services. Fees will be assessed for other direct client services, such as, medical services and Anti-Epileptic Drug Program. The fee shall be assessed using the total gross family income, the approved sliding fee schedule, and the financial worksheet. Providers must review proof of income for all adults in the household.

(a) All clients who are enrolled, or become enrolled, in Medicaid and all clients with a gross family income below 100 percent of the most current poverty guidelines published by the Federal Office of Management and Budget (OMB) shall be eligible for medical services provided by the ESP at no charge.

(b) When the gross family income is between 100 and 200 percent of the federal OMB poverty income guidelines the client would be responsible for payment of a portion of the provider's cost of the medical services provided based upon a sliding fee schedule.

(c) When the gross family income is at or above 200 percent of the federal OMB poverty income guidelines the client would be responsible for 100% of the provider's cost of services.

(4) Waiver of Charges:



(a) CHD directors/administrators and their subcontractors have the authority to reduce or waive charges in situations where a person with an income above 100 percent of poverty is unable to pay.

(b) Clients may request a review of their fee charge on the basis that they have severe, unusual, and unavoidable expenses or obligations that substantially reduce their ability to pay and which warrant special consideration.

(c) Clients requesting special consideration must be able to submit receipts, tax records, bills, or certified statements that document their need for special consideration.

(5) Plan of Care (POC): Providers shall complete a Plan of Care (POC) with each ESP client. The POC is developed and implemented at the time of intake and it is reviewed at least annually to assure the client is on target with the stated goals and objectives.

(a) Purpose of the POC: The purpose of the POC is to identify an ESP client's needs, delineate action to meet these needs and serve as the basis for case management.

(b) POC Development: The plan is based upon observations, self declaration, interviews, and progress reports. All client needs must be identified regardless of availability of resources.

(c) POC Goals: Goals will be specific, measurable, attainable, and will be developed in accordance with client's consent.

(d) POC Core: At a minimum, providers will develop core goals for each of the following basic needs:

1. Epilepsy Medical Care and Treatment,
2. Epilepsy Education,
3. Overall Health Needs,
4. Financial Situation,
5. Transportation Needs,

6. Confidentiality: Relatives and friends may be informed of the POC only if the ESP client/legal guardian gives consent.

(6) Disenrollment: The provider may disenroll a client for any of the following reasons below:

(a) The ESP client no longer meets one of the eligibility requirements in Rule 64F-9.003, F.A.C.

(b) The ESP client does not agree and/or comply with the developed POC.

(c) The ESP client does not pay fee(s) for medical service and is unwilling to agree to a payment plan.

(d) The ESP client does not provide or complete information as requested by the provider.

(e) The ESP client is repeatedly belligerent and displays confrontational behavior towards staff.

(f) The ESP client is no longer in need of services.

(g) The ESP client request closure of their case file.

(h) The ESP client has not received services in the past 12 months.

Rulemaking Specific Authority 385.207(4) FS. Law Implemented 385.207, 39, 402.33 FS. History--New 11-1-92, Amended 4-29-96, Formerly 10D-117.006, Amended \_\_\_\_\_.

(Substantial rewording of Rule 64F-9.004 follows. See Florida Administrative Code for present text)

64F-9.004 Epilepsy Services Program Prevention and Education Services Prevention Program Activities.

Epilepsy Services Program (ESP) will disseminate information through education and awareness activities to promote the early recognition, treatment, prevention and reduce stigma associated with epilepsy. The provider will ensure that epilepsy education awareness and prevention services are provided in all of Florida's 67 counties through a network of statewide providers serving local communities. Persons with epilepsy and their families, professionals and the general public will receive education. There are no eligibility requirements for participation in activities.

Rulemaking Specific Authority 385.207(4) FS. Law Implemented 385.207 FS. History--New 11-1-92, Amended 4-29-96, Formerly 10D-117.011, Amended \_\_\_\_\_.

(Substantial rewording of Rule 64F-9.005 follows. See Florida Administrative Code for present text)

64F-9.005 Epilepsy Services Program ESP Reporting Requirements.

An annual report of services provided outlining the number of clients served, outcome reached and expenses incurred will be compiled and delivered to the Department of Health within 60 days of the end of the contract year.

Rulemaking Specific Authority 385.207(4) FS. Law Implemented 385.207 FS. History--New 11-1-92, Amended 4-29-96, Formerly 10D-117.014, Amended \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Melba Hawkins-Littles

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Ana M. Viamonte Ros, M.D., M.P.H., State Surgeon General

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 6, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: October 24, 2008

## DEPARTMENT OF FINANCIAL SERVICES

### Division of Consumer Services

RULE NO.:  
69J-2.003

RULE TITLE:  
Mediation Procedures for Resolution of Disputed Personal Lines Insurance Claims Arising from the 2004 and 2005 Hurricanes and Tropical Storms

**PURPOSE AND EFFECT:** Rule 69J-2.003, F.A.C., is being repealed. Since the number of disputed residential insurance claims being mediated through that program has significantly diminished, there is no longer a need for this rule. Rule 69J-166.031, which establishes a mediation program administered by the Department, will replace this rule.

**SUMMARY:** Rule 69J-2.003, F.A.C., is repealed.

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

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

**RULEMAKING AUTHORITY:** 624.308, 626.9611, 627.7015(4) FS.

**LAW IMPLEMENTED:** 624.307(1), (2), (5), 624.317, 624.318, 624.324, 626.859, 626.874, 626.877, 626.9541(1)(a), (e), (u), 626.9561, 626.9641(1)(g), 627.7015 FS.

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

**DATE AND TIME:** Monday, April 6, 2009, 3:00 p.m.

**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 workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Ellen Simon, (850)413-4270 or ellen.simon@myfloridacfo.com. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

**THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS:** Ellen Simon, Chief Counsel, Division of Legal Services, Department of Financial Services, 200 E. Gaines Street, Tallahassee, Florida 32399-0333; (850)413-4270 or ellen.simon@myfloridacfo.com

**THE FULL TEXT OF THE PROPOSED RULE IS:**

69J-2.003 Mediation Procedures for Resolution of Disputed Personal Lines Insurance Claims Arising from the 2004 and 2005 Hurricanes and Tropical Storms.

Specific Authority 624.308, 626.9611, 627.7015(4) FS. Law Implemented 624.307(1), (2), (5), 624.317, 624.318, 624.324, 626.859, 626.874, 626.877, 626.9541(1)(a), (e), (u), 626.9561, 626.9641(1)(g), 627.7015 FS. History—New 7-26-06, Amended 12-25-08, Repealed.

**NAME OF PERSON ORIGINATING PROPOSED RULE:** Ellen Simon, Chief Counsel, Division of Legal Services, Department of Financial Services

**NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE:** Alex Sink, Chief Financial Officer, Department of Financial Services

**DATE PROPOSED RULE APPROVED BY AGENCY HEAD:** March 4, 2009

## DEPARTMENT OF FINANCIAL SERVICES

### Division of Consumer Services

<b>RULE NO.:</b>	<b>RULE TITLE:</b>
69J-166.031	Mediation of Residential Property Insurance Claims

**PURPOSE AND EFFECT:** Mediation of claims for the 2004 and 2005 hurricanes have been governed by Rule 69J-2.003, F.A.C. There are few claims left to be mediated and therefore the need for a special process to mediate those claims is no longer needed. This amendment will modify Rule 69J-166.031, F.A.C. to handle those claims.

**SUMMARY:** Under the proposed amendment mediations which would have been governed by Rule 69J-2.003, F.A.C. will be processed under Rule 69J-166.031, F.A.C. Insurers must provide notice of the right to mediate within five days of a first-party claim within the scope of the rule being filed.

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

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

**RULEMAKING AUTHORITY:** 624.308(1), 626.9611, 627.7015(4) FS.

**LAW IMPLEMENTED:** 624.307(1), (2) (4), (5), 626.9541(1)(a), (e), (i), (u), 626.9561, 626.9581(1), 626.9641(1)(g), 627.7015 FS.

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

**DATE AND TIME:** Monday, April 6, 2009, 3:00 p.m.

**PLACE:** 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 workshop/meeting is asked to advise the agency at least 5 days before the workshop/meeting by contacting: Ellen Simon; (850)413-4270 or Ellen.Simon@myfloridacfo.com. If you are hearing or speech impaired, please contact the agency using the Florida Relay Service, 1(800)955-8771 (TDD) or 1(800)955-8770 (Voice).

**THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS:** Ellen Simon, Chief Counsel, Department of Financial Services 200 East Gaines Street, Tallahassee, Florida 32399; (850)413-4270

## THE FULL TEXT OF THE PROPOSED RULE IS:

69J-166.031 Mediation of Residential Property Insurance Claims.

(1) Purpose and Scope. This rule implements Section 627.7015, F.S. The program established under this rule is prompted by the critical need for effective, fair, and timely handling of residential property claims. This program is available to all first-party claimants and insurers prior to commencing the appraisal process set forth in their policies or commencing litigation. The program is also available to litigants referred to the Department from Circuit or County court. For claims which have not previously already been mediated under any Department mediation program Rule 69B-166.030, F.A.C., the mediation procedures described in this rule are available to all residential property claims for property which arise from damage occurring in Dade or Monroe Counties as a result of Hurricane Andrew, as well as the unnamed March 13, 1993, storm wherever the property is located in the State of Florida. This rule does not apply program applies to personal lines claims but not to commercial insurance coverages, or to private passenger motor vehicle insurance coverages, or to disputes relating to liability coverages contained in property insurance policies. This program does not apply to policies issued under the National Flood Insurance Program established under the National Flood Insurance Act of 1968. Commercial residential insurance claims can be mediated pursuant to a separate rule. Before resorting to these procedures, insureds and insurers are encouraged to resolve claims as quickly and fairly as possible.

(2) Definitions. The following definitions shall apply for purposes of this rule:

(a) “Administrator” means the Department or its designee. “Approved”, as used in this rule with regard to approval of a mediator, means to designate based upon successfully meeting of the criteria set forth in Section 44.106, F.S., and the Florida Rules of Certified and Court Appointed Mediators which is incorporated by reference in paragraph (6)(a) of this rule, or Section 627.745(3)(b), F.S. Only approved mediators may mediate disputes under this rule.

(b) “Mediator” means an individual selected by the Department pursuant to paragraph (7)(a) below.

~~(c)(b)~~ “Claim”.

1. “Claim”, when in quotations, refers to any dispute between the insurer and insured relating to a material issue of fact other than:

a. A dispute as to which the insurer has reported allegations of a reasonable basis to suspect fraud, based on an investigation by the insurer’s special investigative unit, to the Department’s Division of Insurance Fraud; or

b. A dispute where, based upon agreed facts as to the cause of loss, there is no coverage under the policy.

2. Unless the parties agree to mediate a claim involving a lesser amount, a “claim” involves the insured requesting \$500 or more to settle the dispute, or the difference between the positions of the parties is \$500 or more, either of which is notwithstanding of any applicable deductible.

3. A policy must have been in effect at the time of the loss to qualify as a “claim.”

~~(d)(e)~~ “Complainant” refers to the party requesting mediation.

~~(e)(d)~~ “Department” means the Department of Financial Services.

~~(f)~~ “Department office” means a designated office of the Division of Consumer Services, Department of Financial Services.

~~(g)~~ “Party” or “Parties” means the insured and his or her insurer, including Citizens Property Insurance Corporation, when applicable.

~~(h)(e)~~ “Respondent” refers to the party not first requesting mediation.

~~(f)~~ “Service office” means a designated office of the Bureau of Consumer Outreach and Education, Division of Consumer Services, Department of Financial Services.

(3) Computation of Time. In computing any period of time described by this rule, the day of the act or event from which the designated period of time begins to run shall not be included. The last day of the period so computed shall be included, unless it is a Saturday, a Sunday, or a legal holiday. All time periods specified in this rule refer to the number of calendar days, not business days, unless otherwise specified in this rule.

~~(4) Service Offices. For disposition of mediation conferences, the State of Florida shall be divided among the following designated service offices:~~

~~(a) Daytona Beach Service Office shall be composed of the following counties: Flagler, Marion, Putnam, and Volusia.~~

~~(b) Fort Lauderdale Service Office shall be composed of Broward county.~~

~~(c) Fort Myers Service Office shall be composed of the following counties: Charlotte, Collier, DeSoto, Glades, Hendry, Highlands, and Lee.~~

~~(d) Jacksonville Service Office shall be composed of the following counties: Alachua, Baker, Bradford, Clay, Columbia, Dixie, Duval, Gilchrist, Hamilton, Lafayette, Levy, Nassau, St. Johns, Suwannee, and Union.~~

~~(e) Miami Service Office shall be composed of Dade and Monroe counties.~~

~~(f) Orlando Service Office shall be composed of the following counties: Brevard, Citrus, Lake, Orange, Osceola, Seminole, and Sumter.~~

~~(g) Pensacola Service Office shall be composed of the following counties: Bay, Calhoun, Escambia, Gulf, Holmes, Jackson, Okaloosa, Santa Rosa, Walton, and Washington.~~

~~(h) Largo Service Office shall be composed of the following counties: Manatee, Pinellas, and Sarasota.~~

~~(i) Tallahassee Bureau of Consumer Assistance Service Office shall be composed of the following counties: Gadsden, Franklin, Jefferson, Leon, Liberty, Madison, Taylor, and Wakulla.~~

~~(j) Tampa Service Office shall be composed of the following counties: Hardee, Hernando, Hillsborough, Pasco, and Polk.~~

~~(k) West Palm Beach Service Office shall be composed of the following counties: Indian River, Martin, Okeechobee, Palm Beach, and St. Lucie.~~

~~(4)(5) Claim Settlement.~~

~~(a) Notification of the right to mediate.~~

~~1. (a) Within five days of the insured filing At the time an insured files a first-party claim which falls within the scope of this rule, the insurer shall notify the insured of their right to participate in this program. An insurer is not required to send a notice of the right to mediate disputed claims when no payment has been made on a claim because the insurer concludes the amount of covered damages is less than the insured's deductible.~~

~~2. The mailing that contains the notice of the right to mediate may include the Department's consumer brochure on mediation but no other materials, forms, or documents may be included. Notification shall be in writing and shall be legible, conspicuous, printed in at least 12-point type, and printed in typeface no smaller than any other text contained in the notice. The first paragraph of the notice shall contain the following statement: "The Chief Financial Officer for the State of Florida has adopted a rule to facilitate the fair and timely handling of residential property insurance claims. The rule gives you the right to attend a mediation conference with your insurer in order to settle any dispute you have with your insurer about your claim. An independent mediator, who has no connection with your insurer, will be in charge of the mediation conference. You can start the mediation process after receipt of this notice by calling the Department of Financial Services at 1(877)693-5236. The parties will have 21 days from the date of the notice to otherwise resolve the dispute before a mediation hearing can be scheduled."~~

~~3. The notice shall also:~~

~~a. Include include detailed instructions on how the insured is to request mediation, including the address, phone number, and fax number for requesting mediation through the Department;~~

~~b. State and indicate that the parties have 21 days from the date of the notice within which to settle the claim before the Department will assign a mediator; otherwise resolve the dispute.~~

~~c. Include The notice shall include the insurer's address and phone number for requesting additional information; and mediation.~~

~~d. State that the Administrator will select the mediator. The notice shall describe the mediator selection process and shall state that if either of the parties so desires the Department will select the mediator.~~

~~e. Refer The notice shall refer to the parties' right to disqualify a mediator for good cause and paraphrase the definition of good cause as set forth in paragraph (7)(e) of this rule.~~

~~f. Indicate The notice shall also indicate that the insured is to notify the mediator 14 days insurer before the mediation conference if the insured will bring representation counsel to the conference, unless the insurer waives the right to the notice of representation counsel. Upon receipt of such notice from the insured, the mediator shall provide notice to the insurer that the insured will be represented at the mediation conference. After the 21 days, a request for mediation by the insured may be made either in writing to the insurer or by telephone call to the insurer. The date of request shall be documented in the insurer's claim file. Every 6 months the insurer shall request from the Department a list of mediators qualified to mediate disputes under this program. For a copy of the current list, the Department may be contacted at its Mediation Section, Bureau of Consumer Assistance, 200 East Gaines Street, Tallahassee, Florida 32399-0322 or at telephone number (850)922-3132.~~

~~(b) Request for Mediation.~~

~~1. By the Insured. An insured may request mediation by contacting the Department at 1(877)693-5236; by faxing a request to the Department at (850)488-6372; or by writing to the Department of Financial Services, Mediation Section, Bureau of Education, Advocacy, and Research, 200 East Gaines Street, Tallahassee, Florida 32399-4212. If an insured requests mediation prior to receipt of the notice of the right to mediation, the insurer shall be notified by the Department of the existence of the dispute 21 days prior to the Administrator processing the insured's request for mediation. If an insurer receives a request for mediation, the insurer shall notify the Mediation Section within 48 hours of receipt of the request by fax or email. The Administrator shall notify the insurer within 72 hours of receipt of requests filed with the Department. The insured shall provide the following information, if known:~~

~~a. Name, address, e-mail address, and daytime telephone number of the insured and location of the property if different from the address given;~~

~~b. The claim and policy number for the insured;~~

~~c. A brief description of the nature of the dispute;~~

~~d. The full name of the insurer and the name, address, e-mail address, and phone number of the contact person for scheduling mediation; and~~

~~e. Information with respect to any other policies of insurance that may provide coverage of the insured property for named perils such as flood or windstorm.~~

2. By an Insurer. An insurer may request mediation by faxing or emailing a written request to the Mediation Section. The insurer shall provide a copy of its written mediation request to the insured at the same time it submits the request to the Department. The written request shall contain the information set forth in subparagraph (4)(b)1. if known. Mediation requests by insurers will be processed by the Administrator in the same manner as mediation requests by insureds.

~~(c)(b)~~ Upon receiving a request for mediation, and after the expiration of the 21 day resolution period, the Administrator ~~insurer~~ shall randomly select from the Department's list a mediator to conduct the mediation conference. The Administrator ~~insurer~~ shall immediately notify the mediator ~~in writing~~ of his or her selection and indicate the names and addresses of the parties and their known representatives, their phone numbers (if known), the Department's file number, the date of the request for mediation, and that the mediation is to occur within 45 days of the request. The mediator will have three business days from the date of notification by the Administrator to accept or reject the selection. If the mediator rejects the selection or fails to accept the selection within three business days, or ~~if the a~~ mediator is disqualified pursuant to paragraph (7)(e), then the Administrator ~~insurer~~ shall randomly select another mediator. For all mediation requests under this rule, the time limits in this section shall not be applicable for two years following the declaration of a disaster. Failure of an insurer to abide by this procedure and to notify the insured as required above will result in the insurer being referred to the Office of Insurance Regulation for further action shall subject the insurer to revocation, suspension, or fine as set forth in sub-subparagraph (9)(a)2.b. of this rule.

~~(5)(6)~~ Rejection of Mediation. An insurer may elect to reject mediation in situations where the dispute does not meet the definition of a "claim." If the insurer desires to reject mediation, the insurer shall reference this mediation process and specify in writing to the insured and the administrator the reason(s) for the rejection. ~~The insurer shall also notify the insured of the insured's right to contest the rejection. To contest the rejection, the insured or the insured's representative must write to the Department at its Mediation Section, Bureau of Consumer Assistance, 200 East Gaines Street, Tallahassee, Florida 32399-0322, within 60 days of the date of the insurer's rejection notification. In the insured's letter contesting the rejection, the insured must specifically state the reasons why the rejection is asserted to be improper. The insurer shall also indicate that the insured should include a copy of the insurer's rejection letter with the insured's letter to the Department. The Department shall determine whether the claim shall be mediated. The parties may elect to voluntarily mediate any dispute regardless of whether the cause of loss or policy status~~

may be in question. In the event that a "claim" falls within the scope of this rule, the insurer shall follow the process set forth in subsection ~~(4)(5)(b)~~ above.

(6) Mediation Costs. Pursuant to Section 627.7015(3), F.S., the insurer shall bear all of the cost of conducting mediation conferences.

(a) The total cost for residential mediation shall be \$350, with \$300 paid as the mediator's fee and \$50 paid as a fee of the Administrator.

(b) For two years following the declaration of a disaster, the amounts allocated to the mediator and the Administrator may be modified by the Department, but in no event will the total cost for mediation exceed those listed in paragraph (6)(a) above.

(c) Fees are payable within 21 days of billing by the Administrator. The Administrator will bill insurers separately for mediator fees and administrator fees for all mediations. The mediator's fee will be payable directly to the mediator by the insurer and the administrative fee paid to the Administrator by the insurer. All administrative fees received by the Department shall be placed in the Insurance Regulatory Trust Fund.

(d) Should a residential mediation conference be cancelled for any reason by the insured or the insurer after it has been scheduled, the mediator shall be paid 50% of the mediator's fee and the Administrator shall be paid the entire administrative fee.

(7) Mediators.

(a) Mediator Approval. The Bureau of Agent and Agency Licensing, Department of Financial Services, shall approve as mediators those persons who meet the qualifications set forth in Section 627.745(3)(b), F.S. Persons wishing to be approved as mediators shall submit their qualifications to the Bureau of Agent and Agency Licensing, Department of Financial Services, 200 East Gaines Street, Tallahassee, FL 32399-0319, on Form DI4-591, "Application for Appointment as a Mediator", which is adopted and incorporated by reference in subsection 69B-211.002(30), F.A.C. For two years following the declaration of a disaster, this program may additionally utilize mediators selected from a panel of circuit court – civil certified mediators approved by the Florida Supreme Court pursuant to the Florida Rules of Certified and Court-Appointed Mediators.

(b) List of Approved Mediators. The Bureau of Agent & Agency Licensing, Department of Financial Services, shall maintain a list of all approved mediators, which list shall include the mediator's name, address, telephone number, ~~social security number~~, a listing of counties in which each mediator is willing to mediate, and date of entry to the list.

(c) Grouping of Assignments. Requests for mediation will, if feasible, be grouped together and assigned to a single mediator. A mediator will be assigned a maximum of four mediation conferences under a single assignment.

(d) Procedure and Conduct. All mediation conferences shall be conducted in accordance with this rule, the Florida Rules for Certified and Court-Appointed Mediators as set forth in Rules 10.020-10.290, Florida Rules of Civil Procedure, as incorporated above, and other consistent rules of conduct as promulgated by the Supreme Court of Florida. Mediators shall have the same responsibilities to the Department as they have to the courts under the Florida Rules for Certified and Court-Appointed Mediators. The Florida Rules for Certified and Court-Appointed Mediators shall be read in a manner consistent with this rule and any conflict between this rule and the Florida Rules for Certified and Court-Appointed Mediators shall be resolved in favor of this rule. The mediator may meet with the parties separately, encourage meaningful communications and negotiations, and otherwise assist the parties to arrive at a settlement. For purposes of this mediation program, mediators shall have the immunity from suit provided to mediators in Section 44.107, F.S. All communications with the mediator shall be confidential. All statements made and documents produced at a settlement conference constitute settlement negotiations in anticipation of litigation. The mediation proceedings are confidential and inadmissible in any subsequent adversarial proceeding.

(e) Complaints; Discipline. At any time a party may move to disqualify a mediator for good cause. Good cause consists of conflict of interest between a party and the mediator, that the mediator is unable to handle the conference competently, or other reasons which would reasonably be expected to impair the conference. Complaints concerning a mediator shall be written and submitted to the Department of Financial Services, Mediation Section, Bureau of Education, Advocacy and Research, Consumer Assistance, Department of Financial Services, 200 East Gaines Street, Tallahassee, Florida 32399-4212 0322. The Department shall review the following grounds for discipline:

1. Alleged instances of dishonest, incompetent, fraudulent, or unethical behavior on the part of a mediator;
2. Instances in which the mediator allegedly failed to promptly and completely respond to requests from the Department and instances in which the actions or failure to act on the part of the mediator violate this rule, including the standards set forth in this subsection or are counter to the intent and purpose of this mediation program or this rule;
3. Administrative action by any other agency or body against the mediator, regardless of whether the agency or body's regulation relates to mediation;
4. The mediator has been found guilty of or pled guilty or nolo contendere to a felony or a crime punishable by imprisonment of 1 year or more under the law of the United States of America or of any state thereof or under the law of any other country, without regard to whether a judgment of conviction has been entered by the court having jurisdiction of such cases.

If the Department determines that any of the above grounds exist, the Department shall institute proceedings in accordance with Chapter 120, F.S., to rescind the approval of the mediator to handle any mediation or arbitration program sponsored by the Department.

(8) Mediation Conference.

(a) Location.

1. The mediation conference shall be held at a reasonable location specified by the mediator within a reasonable proximity of the insured property, unless all parties agree otherwise. In times of declared disaster, the Administrator shall assign the mediation location and notify the mediator of same, if the Administrator determines such action is necessary to facilitate and expedite the mediation process.

2. The Administrator shall ~~Department will~~ make available various conference locations ~~rooms at its various service offices~~ throughout the state for possible use, if the Administrator determines such action is necessary to facilitate and expedite the mediation process.

3. Before scheduling a mediation conference, the mediator may contact the Division of Consumer Services ~~service office administrator~~ to determine the availability of ~~service office~~ facilities to accommodate the mediation conference.

~~4. If no facilities are available at the service office for the particular mediation conference then the service office administrator will designate an alternative location, if available, for the mediation conference.~~

~~4.5.~~ If the parties determine that the assigned conference location is inconvenient or impractical, the parties and mediator may agree to conduct the mediation conference at an alternative location. If the Administrator has assigned a location, the Administrator must also agree to the alternate location.

~~5.6.~~ The mediator will notify the insured, insurer, and the Administrator ~~parties~~ in writing of the exact time, date, and location of the conference. In times of declared disaster, the Administrator shall require additional methods of communication with the insured, if the Administrator determines such action is necessary to facilitate and expedite the mediation process.

(b) Timing and Continuances. The mediation conference shall be held as scheduled by the mediator. Upon application by any party to the mediator for a continuance, the mediator shall, for good cause shown or if neither party objects, grant a continuance and shall notify all parties of the date and place of the rescheduled conference. Good cause includes severe illness, injury, or other emergency which could not be controlled by the party and could not reasonably be remedied by the party prior to the conference by providing a replacement representative or otherwise. ~~Also, Good cause includes the necessity of obtaining additional information, securing the attendance of a necessary professional or the avoidance of significant financial hardship.~~ If the insured demonstrates to

the mediator the need for an expedited mediation conference due to an undue hardship, the conference shall be conducted at the earliest date convenient to all of the parties and the mediator. Undue hardship will be demonstrated when holding the conference on a non-expedited basis would interfere with or contradict the treatment of a severe illness or injury, substantially impair a party's ability to assert their position at the conference, result in significant financial hardship, or other reasonably justified grounds.

(c) Attendance.

1. The insured complainant and the insurer respondent shall attend the mediation conference, have full knowledge of the facts of the dispute, and be fully authorized to make an agreement to completely resolve the claim. ~~All corporate parties who are complainants or respondents shall attend the conference in the person of a corporate representative who has full knowledge of the facts of the dispute and is fully authorized to make an agreement to completely resolve the dispute.~~ An insurer will be deemed to have failed to appear if the insurer's representative lacks authority to settle the full value of the claim. The authority to settle the claim includes the ability to disburse the full settlement amount within 10 7 days of the conclusion of the conference. The insurer will produce at the conference a copy of the policy. The insurer will bring the entire claims file to the conference.

2. The mediation conference also may be attended by persons who may assist a party in presenting his claim or defense in the conference, such as contractors, adjusters, engineers, and interpreters. The parties may not have separate counsel in the mediation conference unless requested by the insured or the parties agree otherwise. If the insured elects to have representation ~~an attorney~~ participate in the conference, the insured shall notify the mediator ~~insurer~~ of such participation 14 days before the conference, unless the parties agree otherwise. Upon receipt of such notice from the insured, the mediator shall provide notice to the insurer that the insured will be represented at the mediation conference. A party will be determined to have not negotiated in good faith if they or a person participating on their behalf continuously disrupts or otherwise inhibits the negotiations as determined by the mediator.

(d) Good Faith Negotiation. The participants are to negotiate in good faith to attempt to resolve the dispute, however, there is no requirement that the dispute must be resolved in mediation.

(e) Disposition. Mediators ~~or insurance companies~~ shall report to the Department on the status of property insurance ~~(other than commercial)~~ mediation conferences by submitting Form DFS-I5-1971 D14-1159, "Disposition of Property Insurance Mediation Conference and Company Remittance Form" (rev. 10/08 8/94), which is hereby adopted herein and incorporated by reference. If the claim is settled prior to the mediation conference being held, the insurer shall report the

outcome of the issue to the mediator prior to the scheduled hearing and the mediator will submit Form DFS-I5-1971 confirming the settlement. A mediation conference will not be considered complete and the Administrator will not bill the insurer until this form is submitted.

(9) Disbursement of Costs.

(a) The insurer shall pay the mediator's fee and the Administrator's fee ~~which shall not exceed \$225~~. The Department reserves the right to reduce fees based on consumer surveys and cost analysis. All funds due the Department shall be remitted to the Department of Financial Services, Mediation Section, Bureau of Education, Advocacy and Research, 200 East Gaines Street, Tallahassee, Florida 32399-4212, together with a reference to the Department's file number, the claim number, identification of the parties, date of the mediation, and name of the mediator. These funds will be deposited in the Insurance Regulatory Trust Fund to defer Department costs.

1. Completed Mediation Conference. A mediation conference is considered complete once the date of the scheduled mediation has passed and disposition Form DFS-I5-1971 has been received by the Administrator. A mediation conference will not be considered complete and will not be billed if it is rescheduled with the agreement of all parties as specified in paragraph (8)(b) of this rule, or if Form DFS-I5-1971 is not received by the Administrator. If the mediation conference is held, the mediator shall receive the mediator's fee. Upon conclusion of the conference, the insurer shall remit \$25 to the Department at the Department of Financial Services, Mediation Section, Bureau of Consumer Assistance, Tallahassee, Florida 32314-6100, along with reference to the claim number, identification of the parties, date of the mediation, and name of the mediator. These funds will be deposited in the Insurance Regulatory Trust Fund to defer Department costs.

2. Cancellation Due To Absence. Failure of a party to arrive at the mediation conference within 30 minutes of the conference's starting time shall be considered an absence. Payment shall be as follows:

a. If the insured fails to appear at the conference, the conference shall be considered to have been held and the insurer must make payment in accordance with subsection (6) of this rule. If the insured wishes to schedule a new conference after failing to appear, the total cost of mediation for the new conference will be borne by the insured. The new conference shall be rescheduled only upon the insured's payment of the total cost of the mediation at the rate specified in subsection (6) of this rule rescheduled upon the insured's payment of the mediator's fee for the conference scheduled to take the place of the conference at which the insured failed to appear.

b. If the insurer fails to appear at the conference, the insurer shall make payment for the conference in accordance with subsection (6) of this rule. If the insurer fails to appear at

the conference without good cause, the insurer shall pay the insured's actual cash expenses incurred in attending the conference and shall pay a second total cost of mediation the mediator's fee for the rescheduled conference. Good cause ~~here~~ includes severe illness, injury, or other emergency which could not be controlled by the insurer and could not reasonably be remedied by the insurer prior to the conference by providing a replacement representative or otherwise. If an insurer fails to appear at conferences with such frequency as to evidence a general business practice of failure to appear, the Department will report the failure to appear to the Florida Office of Insurance Regulation as a potential violation of Florida law. The Florida Office of Insurance Regulation will take such further action as it deems appropriate ~~the insurer shall be subject to penalty, including revocation, suspension, or fine, for violation of Section 626.9541(1)(i), F.S. Such suspension of an insurer's certificate of authority shall be for a period of 2 years. An administrative fine shall be in the amount of \$2,500 per violation in cases of non-willful violation, and \$20,000 per violation in cases of a knowing and willful violation. The Department will mitigate these penalties based upon the following factors: Solvency of the insurer, best interests of or potential harm to insureds, and willfulness of the violation.~~

(b) Any disputes regarding the amount of disbursement of funds shall be resolved by the Department.

(c) Except as provided in subparagraph (8)(a)3., any expenses associated with the mediation conference, such as travel, telephone, postage, meals, lodging, facilities, and other related expenses, shall be borne by the party, mediator or other person incurring the expense.

(10) Post-Mediation.

(a) At the conclusion of the mediation conference, the mediator will file with the Department the "Disposition of Property Insurance Mediation Conference" Form DFS-15-1971 ~~a mediator's status report~~ indicating whether or not the parties reached a settlement. If the parties reached any settlement, then the mediator shall include a copy of the settlement agreement with Form DFS-15-1971 ~~the status report~~. In the event a settlement is reached, the insured shall have 3 business days from the date of the written settlement within which he or she may rescind the settlement provided that the insured has not cashed or deposited any check or draft disbursed to him or her for the disputed matters as a result of the conference. If a settlement agreement is reached and not rescinded, it shall act as a release of specific issues that were presented at the conference.

(b) Any additional claims under the policy shall be presented as separate claims. However, the release shall not constitute a final waiver of rights of the insured with respect to claims for damages or expenses if circumstances that are reasonably unforeseen arise resulting in additional costs which would have been covered under the policy but for the release.

~~(e) If the insured decides not to participate in this program or if the parties are unsuccessful at resolving the claim, the insured may choose to proceed under the appraisal process set forth in the insured's insurance policy, or by litigation, or by any other dispute resolution procedure available under Florida law.~~

(11) The Department is authorized to designate an entity or person as its Administrator to carry out any of the Department's duties under this rule.

(12) If a court holds any subsection or portion of a subsection of this rule or the applicability thereof to any person or circumstance invalid, the remainder of the rule shall not be affected thereby.

Rulemaking Specific Authority 624.308(1), 626.9611, 627.7015(4) FS. Law Implemented 624.307(1), (2), (4), (5), 624.418(2)(a), 624.421(1)(a), 624.4211(1)-(3), 626.9541(1)(a), (e), (i), (u), 626.9561, 626.9581(1), 626.9641(1)(g), 627.7015 FS. History--New 8-18-94, Amended 5-1-96, 4-6-00, Formerly 4J-166.031, 69B-166.031, Amended \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
Ellen Simon, Chief Counsel, Division of Legal Services,  
Department of Financial Services

NAME OF AGENCY HEAD WHO APPROVED THE  
PROPOSED RULE: Tammy Teston, Deputy Chief Financial  
Officer, Division of Consumer Services, Department of  
Financial Services

DATE PROPOSED RULE APPROVED BY AGENCY  
HEAD: March 9, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT  
PUBLISHED IN FAW: December 24, 2008

## FINANCIAL SERVICES COMMISSION

### Finance

RULE NO.:

69V-85.006

RULE TITLE:

Electronic Filing of Forms and Fees

PURPOSE AND EFFECT: The proposed rule requires the electronic filing of forms and fees through the Office of Financial Regulation's Regulatory Enforcement and Licensing (REAL) System. This rule pertains to persons required to be licensed under Chapter 520, Florida Statutes, relating to Retail Installment Sales.

SUMMARY: The proposed rule requires the electronic filing of forms and fees through the Office of Financial Regulation's Regulatory Enforcement and Licensing (REAL) System. This rule pertains to persons required to be licensed under Chapter 520, Florida Statutes, relating to Retail Installment Sales.

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

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



RULEMAKING AUTHORITY: 520.994(5) FS.

LAW IMPLEMENTED: 520.03, 520.32, 520.52, 520.63, 520.999 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: Gregory C. Oaks, Chief, Bureau of Regulatory Review – Finance, Division of Finance, Office of Financial Regulation, 200 East Gaines Street, Tallahassee, FL 32399-0376, phone (850)410-9805, Facsimile (850)410-9914, E-mail: Greg.Oaks@flofr.com

THE FULL TEXT OF THE PROPOSED RULE IS:

69V-85.006 Electronic Filing of Forms and Fees.

(1) For purposes of this rule, “REAL System” means the Office of Financial Regulation’s Regulatory Enforcement and Licensing System, which is accessible through the Office of Financial Regulation’s website at [www.flofr.com](http://www.flofr.com).

(2) All forms adopted under Rules 69V-85.002 and 69V-85.003, F.A.C., must be filed with the Office of Financial Regulation through the REAL system.

(3) All fees required to be filed with the Office of Financial Regulation under Rule 69V-85.003, F.A.C., must be filed through the REAL System.

(4) Any person may petition for a waiver of the requirement of electronic filing of any form or fee under Rule Chapter 69V-85, F.A.C., by filing a petition under Rule 28-106.301, F.A.C. The petition must demonstrate a technological or financial hardship that entitles the person to file the form or fees in a paper format. The Office of Financial Regulation will provide any person granted a waiver under this subsection a hardcopy version of the applicable form.

Rulemaking Authority 520.994(5) FS. Law Implemented 520.03, 520.32, 520.52, 520.63, 520.999 FS. History—New \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Gregory C. Oaks, Chief, Bureau of Regulatory Review – Finance, Division of Finance, Office of Financial Regulation

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Financial Services Commission

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: March 10, 2009

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAW: February 27, 2009

## FINANCIAL SERVICES COMMISSION

### Finance

RULE NO.: RULE TITLE:

69V-160.036 Electronic Filing of Forms and Fees

PURPOSE AND EFFECT: The proposed rule requires the electronic filing of forms and fees through the Office of Financial Regulation’s Regulatory Enforcement And Licensing

(REAL) System. This rule pertains to persons required to be licensed under Chapter 516, Florida Statutes, the Florida Consumer Finance Act.

SUMMARY: The proposed rule requires the electronic filing of forms and fees through the Office of Financial Regulation’s Regulatory Enforcement And Licensing (REAL) System. This rule pertains to persons required to be licensed under Chapter 516, Florida Statutes, the Florida Consumer Finance Act.

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

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

RULEMAKING AUTHORITY: 516.03 FS.

LAW IMPLEMENTED: 516.03 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Gregory C. Oaks, Chief, Bureau of Regulatory Review – Finance, Division of Finance, Office of Financial Regulation, 200 East Gaines Street, Tallahassee, FL 32399-0376; phone (850)410-9805, Facsimile (850)410-9914, E-mail: Greg.Oaks@flofr.com

THE FULL TEXT OF THE PROPOSED RULE IS:

69V-160.036 Electronic Filing of Forms and Fees.

(1) For purposes of this rule, “REAL System” means the Office of Financial Regulation’s Regulatory Enforcement and Licensing System, which is accessible through the Office of Financial Regulation’s website at [www.flofr.com](http://www.flofr.com).

(2) All forms adopted under Rule 69V-160.030, F.A.C., must be filed with the Office of Financial Regulation through the REAL system.

(3) All fees required to be filed with the Office of Financial Regulation under Rules 69V-160.030 and 69V-160.031, F.A.C., must be filed through the REAL System.

(4) Any person may petition for a waiver of the requirement of electronic filing of any form or fee under Rule Chapter 69V-160, F.A.C., by filing a petition under Rule 28-106.301, F.A.C. The petition must demonstrate a technological or financial hardship that entitles the person to file the form or fees in a paper format. The Office of Financial Regulation will provide any person granted a waiver under this subsection a hardcopy version of the applicable form.

Rulemaking Authority 516.03 FS. Law Implemented 516.03 FS. History—New \_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE:  
 Gregory C. Oaks, Chief, Bureau of Regulatory Review –  
 Finance, Division of Finance, Office of Financial Regulation  
 NAME OF AGENCY HEAD WHO APPROVED THE  
 PROPOSED RULE: Financial Services Commission  
 DATE PROPOSED RULE APPROVED BY AGENCY  
 HEAD: March 10, 2009  
 DATE NOTICE OF PROPOSED RULE DEVELOPMENT  
 PUBLISHED IN FAW: February 27, 2009

### Section III

## Notices of Changes, Corrections and Withdrawals

#### DEPARTMENT OF EDUCATION

##### State Board of Education

RULE NO.: RULE TITLE:  
 6A-6.05271 Standards for the Use of Reasonable  
 Force

#### NOTICE OF CONTINUATION

Notice is hereby given that the above rule, as noticed in Vol.  
 35, No. 5, February 6, 2009 Florida Administrative Weekly has  
 been continued from March 17, 2009 to May 19, 2009.

#### DEPARTMENT OF REVENUE

##### Miscellaneous Tax

RULE NO.: RULE TITLE:  
 12B-5.020 Definitions; Specific Exemptions

#### 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. 35, No. 5, February 6,  
 2009 issue of the Florida Administrative Weekly.

Written comments, dated March 2, 2009, were received by the  
 Department regarding the definition of the term “fuel grade  
 ethanol.” In response, the definition of “fuel grade ethanol” has  
 been changed, so that, when adopted, paragraph (e) of  
 subsection (1) of Rule 12B-5.020, F.A.C. (Definitions; Specific  
 Exemptions), will read:

(e) “Fuel grade ethanol” means ethanol blended with at  
 least 1.97 percent gasoline to render the product unsuitable for  
 human consumption pursuant to 27 C.F.R. 19.1005 (hereby  
 incorporated by reference).

#### DEPARTMENT OF REVENUE

##### Miscellaneous Tax

RULE NO.: RULE TITLE:  
 12B-5.150 Public Use Forms

#### 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. 35, No. 5, February 6,  
 2009 issue of the Florida Administrative Weekly.

Written comments, dated March 2, 2009, were received by the  
 Department regarding the definition of the term “fuel grade  
 ethanol.” The definition contained in Forms DR-309631N,  
 DR-309632N, DR-309633N, DR-309634N, DR-309635N,  
 DR-309636N, DR-309637N, and DR-309638N has been  
 changed so that, when adopted, the first two sentences of the  
 category “Ethanol Blends” on each form will read:

Ethanol Blends: Ethanol blends are taxable products  
 resulting from a blend of gasoline and ethanol to create a  
 fuel grade ethanol. Fuel grade ethanol is defined as ethanol  
 blended with at least 1.97 percent gasoline to render the  
 product unsuitable for human consumption.

Subsections (21), (23), (25), (27), (29), (31), (33), and (35) of  
 Rule 12B-5.150, F.A.C., have been changed, so that, when  
 adopted, those subsections will read:

(21) DR-309631N	Instructions for Filing Terminal Supplier Fuel Tax Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>
(23) DR-309632N	Instructions for Filing Wholesaler/Importer Fuel Tax Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>
(25) DR-309633N	Instructions for Filing Mass Transit System Provider Fuel Tax Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>
(27) DR-309634N	Instructions for Filing Local Government User of Diesel Fuel Tax Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>
(29) DR-309635N	Instructions for Filing Blender/Retailer of Alternative Fuel Tax Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>
(31) DR-309636N	Instructions for Filing Terminal Operator Information Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>
(33) DR-309637N	Instructions for Filing Petroleum Carrier Information Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>
(35) DR-309638N	Instructions for Filing Exporter Fuel Tax Return (R. <u>04/09</u> <del>01/08</del> )	<u>01/08</u>

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

Notices for the Board of Trustees of the Internal Improvement  
 Trust Fund between December 28, 2001 and June 30, 2006, go  
 to <http://www.dep.state.fl.us/> under the link or button titled  
 “Official Notices.”