#### Section I

# Notice of Development of Proposed Rules and Negotiated Rulemaking

#### NAVIGATION DISTRICTS

#### Florida Inland Navigation District

RULE NOS.:	RULE TITLES:
66B-1.003	Definitions
66B-1.005	Funds Allocation
66B-1.008	Project Eligibility
66B-1.014	Small-Scale Spoil Island Restoration and
	Enhancement Projects
66B-1.015	Small-Scale Derelict Vessel Removal
	Projects

PURPOSE AND EFFECT: The purpose of the proposed rule development is to revise rule provisions to the Cooperative Assistance Program grant rules.

SUBJECT AREA TO BE ADDRESSED: Cooperative Assistance Program rule sections: definitions. funds allocations, project eligibility, Small-Scale Spoil Island Restoration and Enhancement Projects and Small-Scale Derelict Vessel Removal Projects.

RULEMAKING AUTHORITY: 374.976(2) FS.

LAW IMPLEMENTED: 374.976 (1) - (3) FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Janet Zimmerman, Assistant Executive Director, Florida Inland Navigation District, 1314 Marcinski Rd, Jupiter, Florida 33477 Telephone Number: (561)627-3386. Email: JZimmerman@aicw.org

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

#### NAVIGATION DISTRICTS

#### Florida Inland Navigation District

RULE NOS.:	RULE TITLES:
66B-2.003	Definitions
66B-2.005	Funds Allocation
66B-2.0061	Emergency Applications
66B-2.008	Project Eligibility
66B-2.014	Small-Scale Spoil Island Restoration and
	Enhancement Projects

66B-2.015 Small-Scale Derelict Vessel Removal

**Projects** 

PURPOSE AND EFFECT: The purpose of the proposed rule development is to revise rule provisions to the Waterways Assistance Program grant rules.

SUBJECT AREA TO BE ADDRESSED: Waterways Assistance Program rule sections: definitions. funds allocations, emergency applications, project eligibility, Small-Scale Spoil Island Restoration and Enhancement Projects and Small-Scale Derelict Vessel Removal Projects

RULEMAKING AUTHORITY: 374.976(2) FS.

LAW IMPLEMENTED: 374.976 (1) - (3) FS.

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

DATE AND TIME: December 4, 2020, 11:00 a.m.

PLACE: The FIND office, 1314 Marcinski Road, Jupiter Florida 33477.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Janet Zimmerman, Assistant Executive Director, Florida Inland Navigation District, 1314 Marcinski Rd, Jupiter, Florida 33477 Telephone Number: (561)627-3386. Email: JZimmerman@aicw.org

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

#### NAVIGATION DISTRICTS

#### Florida Inland Navigation District

RULE NOS.: RULE TITLES:
66B-3.002 Definitions
66B-3.005 Title Reports
66B-3.007 Appraisal Procedures

66B-3.008 Determining the Maximum Amount

66B-3.009 Appraiser Selection 66B-3.013 Multi-Party Acquisitions

PURPOSE AND EFFECT: The purpose of the proposed rule development is to clarify and revise rule provisions to the Land Acquisition Procedure rules.

SUBJECT AREA TO BE ADDRESSED: Land Acquisition Procedure rule sections: Definitions, Title Reports , Appraisal Procedures, Determination of Maximum Amount, Appraiser Selection and Multi-Party Acquisitions

RULEMAKING AUTHORITY: 374.976(2) FS.

LAW IMPLEMENTED: 374.976 (1) - (3) FS.

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

DATE AND TIME: December 4, 2020, 11:00 a.m.

PLACE: The FIND office, 1314 Marcinski Road, Jupiter Florida, 33477

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Janet Zimmerman, Assistant Executive Director, Florida Inland Navigation District, 1314 Marcinski Rd, Jupiter, Florida 33477 Telephone Number: (561)627-3386. Email: JZimmerman@aicw.org

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

#### DEPARTMENT OF FINANCIAL SERVICES

#### **Division of Insurance Agent and Agency Services**

RULE NOS.:	RULE TITLES:
69B-221.003	Managing General Agents
69B-221.051	Actively Engaged in Business; Place
	Suitably Designated; Accessible to Public
69B-221.055	Permanent Office Records Required
69B-221.060	Notice of Change of Address
69B-221.070	Build-up Funds; Reporting
69B-221.080	Professional Bail Bond Agent; Justification
	and Sufficiency of Sureties
69B-221.085	Rate Filing; Approval; Proof
69B-221.095	Soliciting Business
69B-221.100	Terms and Conditions of Contract;
	Surrender Form
69B-221.105	Premium Charge Only Permitted
69B-221.110	Premium Shall Be Term Charge; Premium
	Refund; When
69B-221.135	Collateral Security Requirements
69B-221.155	Forms for Limited Surety (Bail Bond)
	Agents

PURPOSE AND EFFECT: The purpose of the proposed amendments to these rules is to remove references to repealed statutes; allow for paperless offices and electronic records; modernize the process for licensees to update their contact information with the Department; repeal processes that are no longer used; clarify how bail bond agents comply with the telemarketing laws of Florida; and update the rules and forms in accordance with current practices of the Department.

SUBJECT AREA TO BE ADDRESSED: Limited surety agents, professional bail bond agents, and bail bond agencies in Florida

RULEMAKING AUTHORITY: 624.308(1), 648.26(1)(a), 648.355(1)(e), 648.4425 FS.

LAW IMPLEMENTED: 501.059(2),(4), 501.613, 501.616(6), 624.501(6),(14),(21), 648.26(1)(a), 648.27, 648.27(8), 648.285, 648.29, 648.295, 648.33, 648.34, 648.35(2), 648.355, 648.36, 648.382, 648.383, 648.384, 648.387, 648.388, 648.39, 648.421, 648.44, 648.44(1)(j), 648.44(6), 648.442(1),(8), 648.4425, 648.45, 648.48, 903.09 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE DEVELOPMENT AND A COPY OF THE PRELIMINARY DRAFT, IF AVAILABLE, IS: Ray Wenger, Chief, Bureau of Investigation (please see contact information in paragraph above)

# THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS:

69B-221.003 Managing General Agents.

(1) All insurers regularly engaged in the bail bond business in this state <u>must appoint a shall have a licensed and appointed</u> managing general agent, who is a licensed and appointed bail bond agent in this state, <u>to and shall</u> be responsible for the supervision of their bail bond agents.

(2) The managing general agent and the insurer will be subject to administrative action for failure to provide bail bond records to the Department within 48 hours of receipt of a request from the Department for such records. The records of all bail bonds written in this state must be made available within 48 hours after being requested by the Department. Failure to provide documents when requested will result in the managing general agent and insurer being subject to administrative action. Rulemaking Authority 648.26(1)(a) FS. Law Implemented 648.25, 648.27(8), 648.36, 648.365, 648.388, 648.48 FS. History–New 4-14-97, Amended 1-22-03, Formerly 4-221.003, Amended

# 69B-221.051 <u>Bail Bond Offices and Temporary Bail Bond</u> <u>Agents Actively Engaged in Business; Place Suitably</u> <u>Designated; Accessible to Public.</u>

Every bail bond agent must be actively engaged in the bail bond business,; in a building suitably designated as a bail bond agency, which must be maintained open and accessible to the public to render service during reasonable business hours.

(1) Each bail bond agency, and each branch office, of a bail bond agency must shall be in the active full-time charge of a

licensed and appointed primary bail bond agent <u>assigned solely</u> to that office, as required by section 648.387, F.S., <u>who must</u> and shall be designated on <u>Fform DFS-H2-1541</u>, (Rev. 7/13) http://www.flrules.org/Gateway/reference.asp?No=Ref 03250 <u>"Filing of Bail Bond Agency Business Name and Designation/Deletion of Primary Bail Bond Agent," (Rev. MO/20) which is adopted and incorporated herein by reference. This form is <u>hereby incorporated by reference in this rule and is available at [DOS hyperlink] or from the following website: http://www.MyFloridaCFO.com/Division/Agents/Licensure/Forms available from the Division of Agents and Agency Services, Department of Financial Services at http://www.myfloridacfo.com/Division/Agents.</u></u>

- (2) through (3) No change.
- (4)(a) A temporary bail bond agent must be employed fultime and shall be physically accompanied by the supervising bail bond agent or bail bond agent from the same agency as required by section sections 648.25(8) and 648.355(8), F.S. As used in this rule, the term "full-time" means that the temporary bail bond agent must work at least 1,540 hours during 12 months of employment as a temporary bail bond agent. This will result in an average of slightly less than 30 hours per week. Each employer of a temporary bail bond agent must provide the temporary bail bond agent the opportunity to work at least 30 hours a week during the period of employment and may allow the temporary bail bond agent to work more than 30 hours per week.
  - (b) No change.
- (c) Each month, the The supervising bail bond agent shall certify under oath the names and hours worked each week for all temporary bail bond agents by filing file monthly a certified report under oath on Fform DFS-H2-1543, (Rev. 7/13), http://www.flrules.org/Gateway/reference.asp?No=Ref-03251 "Temporary Bail Bond Agent Employment Report," (Rev. MO/19) which is adopted and incorporated herein by reference. This form is hereby incorpated by reference in this rule and is available at [DOS hyperlink] or from the following website: http://www.MyFloridaCFO.com/Division/Agents/Licensure/Forms available from the Division of Agents and Agency Services, Department of Financial Services at http://www.myfloridacfo.com/Division/Agents.
- (d) through (e) No change.

  Rulemaking Authority 648.26(1)(a), 648.355(1)(e) FS. Law Implemented 648.25, 648.34, 648.44(6) 648.355, 648.387, 648.421, 648.44(6) FS. History–Repromulgated 12-24-74, Amended 7-27-78, 12-23-82, Formerly 4-1.04, 4-1.004, Amended 4-14-97, 7-2-98, 1-22-03, Formerly 4-221.051, Amended 8-12-04, 4-18-11, 11-6-13, \_\_\_\_\_\_\_.

69B-221.055 Permanent Office Records Required.

Each licensee, <u>under chapter 648</u>, F.S., as a minimum requirement for permanent office records shall maintain:

- (1) A daily bond register which <u>must shall</u> be the book <u>or electronic documentation</u> of original and permanent <u>records</u> records of all bonds or undertakings executed by the licensee and must include:
  - (a) The number of the Power of Attorney form;
  - (b) The date the bond was executed;
  - (c) The name of the principal;
  - (d) The amount of the bond;
  - (e) The premium charged;
  - (f) The premium reported to the surety company;
  - (g) The security or collateral received;
  - (h) Indemnity agreements;
  - (i) The disposition of bond; and
- (j) The date of disposition which shall state the number of the Power of Attorney form, date bond was executed, name of principal, amount of bond, premium charged, premium reported to surety company, security or collateral received, indemnity agreements, disposition of bond, and date of disposition.
- (2) An individual file, envelope, or electronic folder or file or envelope for each principal for whom bond is made, which must include:
- (a) The original application for the bail bond or undertaking;
  - (b) A copy of the premium receipt;
  - (c) A copy of the collateral receipt;
- (d) A copy of each bond attached to every corresponding power of attorney used to justify his or her suretyship in relation to the bond with the court pursuant to section 903.09, F.S.;
  - (e) A copy of a bond discharge, if issued;
  - (f) A security or collateral affidavit;
  - (g) The location of the security or collateral;
- (h) Information as to any security or consideration received by the agency or licensee in connection with each particular bail bond or undertaking and the purpose for which it was received; and
- (i) The receipt or release executed by the person(s) posting security or collateral evidencing the return of such security or collateral and indemnity agreement as executed by coindemnitors which shall contain the original application for bail bond or undertaking, copy of premium receipt, copy of collateral receipt, copy of a bond discharge, if issued, security or collateral affidavit, where security or collateral is located, information as to any security or consideration received by the agency or licensee in connection with each particular bail bond or undertaking and purpose for which it was received, receipt or release executed by the person or persons posting security or collateral evidencing the return of such security or collateral and indemnity agreement as executed by co-indemnitors.

Rulemaking Authority <u>624.308(1)</u>, 648.26(1)(a) FS. Law Implemented <del>648.25</del>, 648.34, 648.36 FS. History–Repromulgated 12-24-74, Formerly 4-1.01, Amended 9-10-91, Formerly 4-1.001,

Amended 4-14-97, 1-22-03, Formerly 4-221.055, Amended

#### 69B-221.060 Notice of Change of Address.

- (1) Each licensee under chapter 648, F.S., shall provide notice notify in writing to the Department of Financial Services, Division of Insurance Agent and Agency Services, Bureau of Licensing, each Bail Bond Section, Larson Building, 200 East Gaines Street, Tallahassee, Florida 32399 0320, insurer, and managing general agent and the licensee represents, and the clerks of each court in which the licensee is they are registered, of a change of each business address, email address, telephone number, or name of each agency or firm for which the licensee writes they write bonds within ten (10) working days of such change.
- (2) Licensees Each licensee shall provide the requisite notice to the Department by logging into their MyProfile accounts through the MyProfile online portal located at <a href="https://dice.fldfs.com/public/pb\_index.aspx">https://dice.fldfs.com/public/pb\_index.aspx</a> or by using use Form DFS-H2-1564 (Rev. 8-12-04), entitled "Bail Bond Agent Notice of Change of Address," (Rev. MO/20), which is hereby incorporated and adopted by reference, to comply with the notice requirements of this rule. This form is available at [DOS hyperlink] and may be obtained from the following address listed above or from the Department's

website:

# www.MyFloridaCFO.com/Division/Agents/Licensure/Forms www.MyFloridaCFO.com/Division/Agents.com.

Rulemaking Authority <u>624.308(1)</u>, <u>648.26(1)(a)</u> FS. Law Implemented 648.421 FS. History—New 12-23-82, Formerly 4-1.17, Amended 9-10-91, Formerly 4-1.017, Amended 4-14-97, 1-22-03, Formerly 4-221.060, Amended 8-12-04, \_\_\_\_\_\_\_.

#### 69B-221.065 Statistical Reporting Form.

Rulemaking Authority 648.26 FS. Law Implemented 648.365 FS. History—New 12-23-82, Formerly 4-1.19, Amended 9-10-91, Formerly 4-1.019, Amended 4-14-97, Formerly 4-221.065,Repealed ...

#### 69B-221.070 Build-up Funds; Reporting.

- (1) All managing general agents and insurers authorized to write bail bonds in this state who maintain build-up trust accounts pursuant to section 648.29, F.S., shall annually file with the Department, on or before March 1st + of each year, a certified statement listing each build-up trust account established on behalf of any bail bond agent or agency and the balance therein as of January 1st + of that year. The statement must: shall
- (a) Bbe printed on 8.5" x 11" 8 1/2" 11" paper or an electronic equivalent;
- (b) The first page of the statement shall Ceontain the name, address, and phone number of the insurer, and the name and title of the person who certified the statement on its first page;

- (c) The statement shall further List the name of each bail bond agent or agency, the name of the financial institution where the account is maintained, the account number, and the balance therein:
- (d) The statement shall then Bbe certified by the person who prepared and reviewed its the accuracy; and
- (e) Be mailed to the Department of Financial Services, Division of Insurance Agent and Agency Services, Bureau of Investigation, 200 East Gaines Street, Tallahassee, FL 32399-0320 or emailed to Bailbond@MyFloridaCFO.com of the statement.
  - (2) No change.

Rulemaking Authority <u>624.308(1)</u>, 648.26(1)(a) FS. Law Implemented 648.29, 648.36 FS. History—New 9-10-91, Formerly 4-1.021, Amended 4-14-97, 1-22-03, Formerly 4-221.070, Amended

#### 69B-221.085 Rate Filing; and Approval; Proof.

- (1) Pursuant to section 648.35(2), F.S., the rates as filed and approved by the Office of Insurance Regulation are the only rates which may be used and the same rate must apply to every bond written. Professional bail bond agents must charge the rate approved by the Office of Insurance Regulation and may not advertise reduced rates.
- (2) All bail bond rate filings <u>must shall</u> be submitted on Form <u>DFS-H2-503</u>, <u>DI4-503</u>, <u>Rev. 10/90</u> "Bail Bond Rate Filing," which is adopted and incorporated herein by reference in Rule 69B-211.002, F.A.C. This form may be obtained from [DOS hyperlink] <u>or https://myfloridacfo.com/Division/Agents/Licensure/Forms/default.htm</u> the Office of Insurance Regulation, Bureau of P & C Forms and Rates, Larson Building, Tallahassee, Florida 32399-0300.
- (3) Before the rate filing may be changed, a new filing must be made and approved by the Office of Insurance Regulation. The professional bail bond agent must be able to prove that their previous rate was either too high or too low as the case may be. Bail bond agents must charge the rate approved by the Office of Insurance and may not advertise reduced rates.

Rulemaking Authority 648.26(1)(a) FS. Law Implemented 648.35(2), 648.36 FS. History–Repromulgated 12-24-74, Formerly 4-1.11, Amended 9-10-91, Formerly 4-1.011, Amended 4-14-97, Formerly 4-221.085, Amended

#### 69B-221.095 Soliciting Business.

- (1) No <u>licensee</u> person shall, directly or indirectly, solicit business in or on the property or grounds of a jail, prison, or other place where prisoners are confined, or in or on the property or grounds of a court or any building housing courtrooms.
- (a) For the purposes of this rule, the locations specified in subsection (1) include all parking lots and parking spaces

adjacent to the locations or adjacent to public walkways or public streets that are adjacent to the locations.

- (b) As used in this rule, "solicit" includes:
- (2) For the purposes of this rule, solicit shall include:
- <u>1.(a)</u> Displaying, wearing, or distributing any item which directly or indirectly advertises bail bond services; (only state-issued or state-approved identification that includes a citation of the licensee's arrest powers may be worn); or
- <u>2.(b)</u> Approaching anyone or urging, enticing, luring, or inviting anyone to approach a bail bond agent to use <u>his or her services</u>; their services.
- 3.(e) Parking a motor vehicle, that which displays the name of a bail bond agent, a bail bond agency, or any other information advertising bail bond services;
- 4.(d) Passing out business cards or other print advertising (print advertising does not include yellow page advertising in the telephone book), unless requested by the principal or indemnitor or other print advertising by any licensee or unlicensed persons in jails, courthouses, or other immediate areas as described in subsection (3). Print advertising allowed in the telephone book is yellow page advertising; and.
  - 5. Loitering.
- (2) Any bail bond agent who makes a telephone sales call shall comply with the requirements of sections 501.059(2) and (4), 501.613, and 501.616(6), F.S.
- (e) Only the state issued or approved identification which includes a citation of the licensee's arrest powers may be worn in the locations described in subsection (3).
  - (f) Loiter in any of the areas described in subsection (3).
- (3) For the purposes of this rule, the property or grounds of a court, jail, prison, or other place where prisoners are confined shall include all parking lots and parking spaces adjacent to such places or adjacent to public walkways or public streets adjacent to such places.

Rulemaking Authority <u>624.308(1)</u> 648.26(1)(a) FS. Law Implemented 648.44, <u>501.059(2)</u>,(4), <u>501.613</u>, <u>501.616(6)</u> FS. History–New 12-23-82, Formerly 4-1.18, Amended 11-5-89, Formerly 4-1.018, Amended 4-14-97, 1-22-03, Formerly 4-221.095, Amended

69B-221.100 Terms and Conditions and Notices of Contract; Surrender Form.

(1) The <u>following T</u>terms and <u>C</u>eonditions <u>must be included in of-all contracts entered into between a principal and a surety for a bail bond shall set forth the bond number, the date, the amount of the premium and the name of the surety company as follows:</u>

#### TERMS AND CONDITIONS

The following terms and conditions are an integral part of this contract application for appearance bond No. \_\_\_ dated \_\_\_ for which \_\_\_ Surety Company or its agent shall receive a premium in the amount of \_\_\_ <u>Dollars</u> (\$\_\_\_) <del>Dollars</del>, and the parties agree that said appearance bond is conditioned upon full

compliance by the principal of all said terms and conditions and is a part of said bond and application therefor.

- 1. \_\_\_ Surety Company, as <u>issuer of the bond bail</u>, shall have control and jurisdiction over the principal during the term for which the bond is executed and shall have the right to apprehend, arrest, and surrender the principal to the proper officials at any time as provided by law.
- 2. In the event surrender of principal is made prior to the time set for principal's appearances, and for reasons other than as enumerated below in paragraph 3., then a refund of the bond premium <u>must</u> shall be made to the person listed on the premium receipt.
- 3. It is understood and agreed that the happening of any one of the following events constitutes shall constitute a breach of principal's obligations to \_\_\_\_ Surety Company hereunder, and \_\_\_\_ Surety Company will shall have the right to forthwith apprehend, arrest, and surrender principal, and principal will shall have no right to any refund of premium whatsoever. Said events which shall constitute a breach of principal's obligations hereunder are:
- (a) If principal <u>departs</u> shall depart the jurisdiction of the court without the written consent of <u>both</u> the court and \_\_\_\_\_ Surety Company, or its Agent.
- (b) If principal <u>moves</u> shall move from one address to another within the State of Florida without notifying \_\_\_\_ Surety Company or its Agent in writing prior to said move.
- (c) If principal <u>commits</u> shall <u>commit</u> any act which <u>constitutes</u> shall <u>constitute</u> reasonable evidence of principal's intention to cause a forfeiture of said bond.
- (d) If principal is <del>arrested and</del> incarcerated for any offense other than a minor traffic violation.
- (e) If principal <u>makes</u> shall make any material false statement in the application.
- (f) If the indemnitor is obligated to make premium payment(s) under a written agreement pursuant to Rule 69B-221.105(5), F.A.C., and fails to do so.

#### INFORMATIONAL NOTICE

For complaints or inquiries, please contact:

Florida Department of Financial Services

Division of Consumer Services

200 East Gaines St.

Tallahassee, FL 32399-0322

(877) <u>693-5236</u> <del>692-5236</del> (in-state)

(850) 413-3089 (all areas)

Signature of Applicant

Signed, sealed and delivered this \_\_ day of \_\_, 20\_\_\_.

Signature of Applicant	
Mailing address	

(2) Any bail bond agent who surrenders or recommits a defendant prior to a forfeiture shall execute Fform DFS-H2-1542 (07/02) titled; "Statement of Surrender Form", (Rev. MO/20) which is adopted and incorporated herein by reference. This form is hereby incorporated by reference in this rule and can be obtained at [DOS hyperlink] or from the following website:

http://www.myfloridacfo.com/Agents/Licensure/Forms/index.
htm. The licensee shall provide a copy to the defendant; and maintain a copy in the defendant's file of the defendant. This form is available from the Department's website: www.myfloridacfo.com/Division/Agents.

Rulemaking Authority 648.26(1)(a), 648.4425 FS. Law Implemented 648.4425 FS. History—Repromulgated 12-24-74, Formerly 4-1.16, Amended 9-10-91, Formerly 4-1.016, Amended 1-22-03, Formerly 4-221.100, Amended

## 69B-221.105 Premium Charge Only Permitted.

- (1) No surety, bail bond agent, temporary bail bond agent, or managing general agent engaged in the bail bond business shall make any charge, collect, or receive any fee or consideration, other than the premium based on current rates, unless permitted by statute or rule, other than the premium based on rates in current use, provided, however, that
- (a) Nnothing in this <u>rule prohibits</u> section shall prohibit collateral security or co-indemnity agreements., and provided further that
- (b) In instances where an additional surety, bail bond agent, or managing general agent located in a county different from the originating agent or bail bond agent executes the bond, the premium may include additionally include as a part thereof an execution and transfer fee, not to exceed a total of one hundred (\$100.00) dollars for any one defendant.
- (c) If a bail bond agent assumes the liability on an out-of-state bond, the transfer fee collected <u>must</u> shall not exceed the amount charged in that state.
- (d) If monies for documentary stamps are collected and the mortgage is not filed, the funds must be returned to the person who tendered the monies.
- (2) No bail bond agent shall charge, collect, or receive any fee or consideration for services rendered to the principal or indemnitor in connection with a bail bond, except those fees listed in subsection (3) below (4), and costs necessary to apprehend the principal in the event the principal attempts to flee the jurisdiction of the courts.
- (3) Prohibited fees include, but are not limited to, any costs regarding arrest, transportation, and surrender within the specified jurisdiction of the court, charges for storage, maintenance or return of collateral, including releases of liens or satisfactions of mortgages, charges for researching case dispositions or obtaining bond discharges or any charge for other services ordinarily performed by a bondsman or their

employees in the regular course of business and any other expenses not documented by check or receipt.

- (4) is renumbered as (3) No change.
- (4) Examples of prohibited fees include any costs regarding arrest, transportation, and surrender within the specified jurisdiction of the court, charges for storage, maintenance or return of collateral, including releases of liens or satisfactions of mortgages, charges for researching case dispositions or obtaining bond discharges, any charge for other services ordinarily performed by a bondsman or the bondsman's employees in the regular course of business, and any other expenses not documented by check or receipt.
- (5) At the time a bond is executed, the bail bond agent may choose to collect only a portion of the full premium required by section 648.33(2), F.S., provided:
- (a) The initial premium payment collected is at least 10% of the total premium due per the applicable rate filing;
- (b) The bond is fully collateralized at the time it is executed;
- (c) The bail bond agent and the indemnitor execute a written agreement containing all of the terms under which the indemnitor must pay the premium, which must contain the following information in a clear, legible format;
- 1. The bail bond agency's name, address, and telephone number;
  - 2. The defendant's name, address, and telephone number;
    - 3. The indemnitor's name, address, and telephone number;
- 4. The surety company's name, address, and telephone number;
- 5. The following statement, in substantially the same form, in at least 14 size font: "Pursuant to section 648.295(1), Florida Statutes, all premiums owed in full to the surety company must only be paid through the bail bond agency as the surety company's agent in a fiduciary capacity, and the surety company is authorized to attempt to directly collect any unpaid premiums;"
  - 6. The date the bond(s) was executed;
  - 7. The number(s) of the Power of Attorney form;
  - 8. The premium receipt number;
- 9. The total premium due and the initial payment collected; and
  - 10. The payment terms for the balance due.
- (e) The surety company, bail bond agent, defendant, and indemnitor receive a copy the completed form;
- (f) The time for full payment does not exceed 180 days from the date the bond(s) was executed;
- (g) All documentation and forms generated pursuant to this rule, including any past due notices and mail receipts, are kept in the bail bond agent's file for the defendant; and
- (h) If the full premium due is not paid and collected within 180 days from the date the bond(s) is executed, the bail bond

agent or surety company is authorized to surrender the defendant to custody and retain any portion of the premium actually paid on the bond(s).

(5) renumbered (6) No change.

Rulemaking Authority <u>624.308(1)</u>, <u>648.26(1)(a)</u> FS. Law Implemented 648.33, 648.44(1)(j), <u>648.45</u> FS. History—New 7-1-69, Repromulgated 12-24-74, Amended 5-22-80, Formerly 4-1.05, Amended 9-10-91, Formerly 4-1.005, Amended 4-14-97, Formerly 4-221.105, Amended \_\_.

# 69B-221.110 Premium Shall Be Term Charge; Premium Refund: When

- (1) The premium permitted under chapter 648, F.S., <u>must</u> shall be a term charge for the term of the bond.
- (2) No additional premium <u>may</u> shall be charged <u>for</u> in the <u>event of</u> a rewrite of a bond based on the same case number, <u>unless</u> except that in the <u>event</u> the amount of the bond has been increased, <u>in which case</u> an additional premium based on the <u>current</u> rates in <u>current use</u> for the amount of the increase may be charged.
- (3) The executing licensed bail bond agent shall refund the entire premium charged for the bond when it is found that the surety had no liability under the bond because the defendant does not come under the jurisdiction of the court to which the defendant is returnable or the defendant is not released from custody, except where a bond is written to allow the defendant to serve a sentence in another jurisdiction.
- (4) The defendant will shall be entitled to the return of premium when surrendered by the surety or bail bond agent at any time prior to the final termination of the surety's liability on the bond; unless the defendant violates the terms and conditions of the contract with the surety, which are specified in Rule 69B-221.100, F.A.C provided that the defendant shall not be entitled to a return of the premium where the defendant violates the contract with the surety.

Rulemaking Authority <u>624.308(1)</u>, 648.26(1)(a) FS. Law Implemented <u>648.295</u> <del>624.307(1)</del>, <del>648.295</del>, 648.33 FS. History–New 7-1-69, Repromulgated 12-24-74, Formerly 4-1.09, Amended 9-10-91, Formerly 4-1.009, Amended 4-14-97, 1-22-03, Formerly 4-221.110, Amended

### 69B-221.135 Collateral Security Requirements.

- (1) No bail bond agent shall accept collateral security or other indemnity of any type in an individual or aggregate amount totaling in excess of fifty thousand dollars (\$50,000) cash per bond, except as provided by section sections 648.442(1)(a)-(e), F.S., or by this rule.
- (2) The meaning of "any other type of security <u>approved</u> <u>by the Department</u>" in section 648.442(1)(e), F.S., is defined to include only the following <del>types of security</del>:
  - (a) Shares of stock of a close corporation; or
  - (b) Patents, copyrights, or trademarks; or-

(c) A certificate of title for a new or used motor vehicle, as defined in section 319.001, F.S.

Rulemaking Authority <u>624.308(1)</u>, <u>648.26(1)(a)</u> FS. Law Implemented <u>648.442(1)</u> FS. History—New 12-23-82, Formerly 4-1.142, Amended 9-10-91, Formerly 4-1.0142, Amended 4-14-97, Formerly 4-221.135, Amended .

69B-221.155 Forms for Limited Surety (Bail Bond) Agents.

The following forms for the bail bond industry are hereby incorporated by reference and <u>are</u> available from the Division of Insurance Agent and Agency Services' Division's website at http://www.MyFloridaCFO.com/Division/Agents/Licensure/F orms: and from the hyperlinks below:

- (1) Form DFS-H2-1500, Limited Surety Agent, Professional Bail Bond Agent, Sworn Statement, (Rev.MO/20) [DOS hyperlink] (Eff. 6/11), which is used to comply with section 648.34(2)(d), F.S., to provide the sworn statements attesting to the character of an applicant for a limited surety (bail bond) agent license. http://www.flrules.org/Gateway/reference.asp?No=Ref 00830.
- (2) Form DFS-H2-1509, Temporary Bail Bond Agent, Mandatory Employment Verification, (Rev. MO/20) [DOS hyperlink] (Eff. 6/11), which is used by an applicant to qualify for a temporary bail bond license as required by section 648.355(1)(e), F.S.

 $\underline{\text{http://www.flrules.org/Gateway/reference.asp?No=Refo0830.}}$ 

- (3) Form DFS-H2-1544, Appointing Form, (Rev. MO/20) [DOS hyperlink] (Eff. 6/11), which permits an appointing entity of a limited surety (bail bond) agent to authorize a licensee to act for the appointing entity as provided in section 648.382, F.S. <a href="http://www.flrules.org/Gateway/reference.asp?No=Ref">http://www.flrules.org/Gateway/reference.asp?No=Ref</a> 00830.
- (4) Form DFS-H2-1544<u>TERM</u> Term, Appointment Termination Form, (Rev. MO/20) [DOS hyperlink] (Eff. 4/11), which permits the appointing entity of a limited surety (bail bond) agent to terminate the appointment of a licensee and cancel that licensee's authority to act for the appointing entity as provided in sections 648.383(1) and 648.384(1), F.S. http://www.flrules.org/Gateway/reference.asp?No=Ref 00830.
- (5) Form DFS-H2-2083 http://www.flrules.org/Gateway/reference.asp?No=Ref 03478, Individual Application for Temporary Permit to Operate a Bail Bond Agency (Rev. MO/20) [DOS hyperlink] (Eff. 3/13), which allows the personal representative or legal guardian of a deceased or mentally incapacitated owner of a bail bond agency to operate that agency as provided by section 648.285(2), F.S.
- http://www.flrules.org/Gateway/reference.asp?No=Ref 03479, Temporary Permit to Operate a Bail Bond Agency (Eff. 3/13), which is the permit that will be issued by the Department when Individual Application for Temporary Permit to Operate a Bail

Bond Agency is approved as provided in section 648.285(2), F.S.

Rulemaking Authority 624.308(1), 648.26(1)(a) FS. Law Implemented 624.501(6), (14), (21), 648.26(1)(a), 648.27, 648.285, 648.34, 648.355, 648.382, 648.383, 648.384, 648.39, 648.442(8) FS. History—New 1-8-12, Amended 1-6-14, \_\_\_\_\_\_.

# Section II Proposed Rules

#### WATER MANAGEMENT DISTRICTS

**South Florida Water Management District** 

RULE NO.: RULE TITLE:

40E-2.091 Publications Incorporated by Reference

PURPOSE AND EFFECT: The Kissimmee River Restoration Project (KRRP) restores over 40 square miles of river/floodplain ecosystem including 43 miles of meandering river channel and 27,000 acres of wetlands. The project is a joint partnership between the District and U.S. Army Corps of Engineers. The KRRP involves an estimated \$800 million public investment that was developed to address public concerns about the effects of the Central and Southern Florida Flood Control Project on the Kissimmee River — specifically the altered hydrology, loss of floodplain wetlands, and resulting loss of habitat and reduced populations of many species of fish and wildlife. The proposed rules identify and reserve water needed for the protection of fish and wildlife.

SUMMARY: The proposed rules will reserve from additional allocation: 1) all surface water in the Kissimmee River, its floodplain, and the Headwaters Revitalization Lakes; 2) quantities of surface water up to specific water reservation stages in the Upper Chain of Lakes; and 3) surface water and groundwater in the surficial aquifer system and contributing waterbodies that contribute water to the reservation lakes and the Kissimmee River and floodplain.

The proposed reservation rules will be implemented in coordination with the District's water use permitting program to ensure future water users do not withdraw reserved water. Direct and indirect withdrawals of water from the Kissimmee River and Headwaters Lakes will be limited to existing permitted water use allocations. Additional direct and indirect withdrawals of water from the Upper Chain of Lakes and contributing waterbodies will be limited to quantities of surface water above the proposed water reservation stages. Any new withdrawals authorized under the water use permitting program shall not reduce average annual flows at S-65 by 4.18 percent. This requirement is imposed to ensure that water use withdrawals do not interfere with KRRP restoration targets. The proposed rules also include regulatory criteria to protect downstream users in the Lake Okeechobee Service Area.

The excerpt of the proposed amendments to the "Applicant's Handbook for Water Use Permit Applications within the South Florida Water Management District" is available on the District's website at: https://www.sfwmd.gov/our-work/water-reservations.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The agency has determined that this rule will have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has been prepared by the agency. The SERC is available on the District's website at: https://www.sfwmd.gov/our-work/water-reservations.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The District completed the Governor's Office of Fiscal Accountability and Regulatory Reform's (OFARR) form "Is a SERC Required?" and prepared a SERC, both of which are available upon request. Based on the completed "Is a SERC Required?" form and the District's SERC and analysis performed to prepare and complete said documents, the proposed rule amendment does not require legislative ratification pursuant to subsection 120.541(3), F.S.

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

RULEMAKING AUTHORITY (formerly "Specific Authority"): 373.044, 373.113, 373.171, 373.216 FS.

LAW IMPLEMENTED: 373.042, 373.0421, 373.083, 373.109, 373.196, 373.219, 373.223, 373.224, 373.229, 373.232, 373.233, 373.236, 373.239, 373.250 FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Don Medellin, Principal Scientist, P. O. Box 24680, West Palm Beach, FL 33416-4680, 1(800)432-2045, ext. 6340 or (561)682-6340, dmedelli@sfwmd.gov.

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

40E-2.091 Publications Incorporated by Reference.

XX

http://www.flrules.org/Gateway/reference.asp?No=Ref05791) is incorporated by reference herein.

(2) The following forms and materials are referenced in the "Applicant's Handbook for Water Use Permit Applications within the South Florida Water Management District – 2021 September 7, 2015"

(http://www.flrules.org/Gateway/reference.asp?No=RefXXX XX) and are incorporated herein:

and are incorporated herein

(a) through (f) No Change.

(g) Form 1392, Daily Stage and Withdrawal Data Form, (

2021)

http://www.flrules.org/Gateway/reference.asp?No=RefXXXXXX, referenced in Subsections 3.11.5.B.2., 5.2.2.K.9.b., and 5.2.2.K.9.d;

(h) Form 1393, Temporary Request and Authorization of Withdrawal Facility Operation, ( , 2021) http://www.flrules.org/Gateway/reference.asp?No=RefXXXX X, referenced in Subsections 3.11.5.C.1.c., 3.11.5.C.2.d., and 5.2.2.K.9.d.

(i) (g) Subsections <u>referenced in Section 3.3.6</u> of the "Environmental Resource Permit Applicant's Handbook, Volume I (General and Environmental)", <u>June 1, 2018 October 1</u>,

(http://www.flrules.org/Gateway/reference.asp?No=Ref-09390 http://www.flrules.org/Gateway/reference.asp?No=Ref 05372) referenced in Section 3.3.6, as follows:

- 1. through 9. No Change.
- (3) No Change.
- (4) The <u>publications</u> "Applicant's Handbook for Water Use Permit Applications within the South Florida Water Management District" and forms incorporated herein are available at no cost by contacting the South Florida Water Management District Clerk's Office, 3301 Gun Club Road, West Palm Beach, FL 33406, 1 (800) 432-2045, ext. 6805 6436 or (561) 682-6805 6436.

Rulemaking Authority 373.044, 373.113, 373.118, 373.171, 373.216 FS. Law Implemented 373.042, 373.0421, 373.083, 373.109, 373.196, 373.219, 373.223, 373.224, 373.229, 373.232, 373.233, 373.236, 373.239, 373.250 FS. History—New 9-3-81, Formerly 16K-2.035(1), Amended 2-24-85, 11-21-89, 1-4-93, 4-20-94, 11-26-95, 7-11-96, 4-9-97, 12-10-97, 9-10-01, 12-19-01, 8-1-02, 6-9-03, 8-31-03, 4-23-07, 9-13-07, 2-13-08, 10-14-08, 7-2-09, 3-15-10, 3-18-10, 9-26-12, 10-23-12, 7-21-13, 7-14-14, 7-16-14, 9-7-15,

NAME OF PERSON ORIGINATING PROPOSED RULE: Lawrence Glenn, Division Director, Water Resources NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: South Florida Water Management District Governing Board DATE PROPOSED RULE APPROVED BY AGENCY HEAD: November 12, 2020

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: July 16, 2014

#### WATER MANAGEMENT DISTRICTS

#### South Florida Water Management District

RULE NOS.: RULE TITLES: 40E-10.021 Definitions

40E-10.031 Water Reservations Implementation

40E-10.071 Water Reservation Areas: Upper and Lower

Kissimmee Basin Planning Areas

PURPOSE AND EFFECT: The Kissimmee River Restoration Project (KRRP) restores over 40 square miles of river/floodplain ecosystem including 43 miles of meandering river channel and 27,000 acres of wetlands. The project is a joint partnership between the District and U.S. Army Corps of Engineers. The KRRP involves an estimated \$800 million public investment that was developed to address public concerns about the effects of the Central and Southern Florida Flood Control Project on the Kissimmee River — specifically the altered hydrology, loss of floodplain wetlands, and resulting loss of habitat and reduced populations of many species of fish and wildlife. The proposed rules identify and reserve water needed for the protection of fish and wildlife.

SUMMARY: The proposed rules will reserve from additional allocation: 1) all surface water in the Kissimmee River, its floodplain, and the Headwaters Revitalization Lakes; 2) quantities of surface water up to specific water reservation stages in the Upper Chain of Lakes; and 3) surface water and groundwater in the surficial aquifer system and contributing waterbodies that contribute water to the reservation lakes and the Kissimmee River and floodplain.

The proposed reservation rules will be implemented in coordination with the District's water use permitting program to ensure future water users do not withdraw reserved water. Direct and indirect withdrawals of water from the Kissimmee River and Headwaters Lakes will be limited to existing permitted water use allocations. Additional direct and indirect withdrawals of water from the Upper Chain of Lakes and contributing waterbodies will be limited to quantities of surface water above the proposed water reservation stages. Any new withdrawals authorized under the water use permitting program shall not reduce average annual flows at S-65 by 4.18 percent. This requirement is imposed to ensure that water use withdrawals do not interfere with KRRP restoration targets. The proposed rules also include regulatory criteria to protect downstream users in the Lake Okeechobee Service Area.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The agency has determined that this rule will have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has been prepared by the agency. The SERC is available on the District's website at: https://www.sfwmd.gov/our-work/water-reservations.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The District completed the Governor's Office of Fiscal Accountability and Regulatory Reform's (OFARR) form "Is a SERC Required?" and prepared a SERC, both of which are available upon request. Based on the completed "Is a SERC Required?" form and the District's SERC and analysis performed to prepare and complete said documents, the proposed rule amendment does not require legislative ratification pursuant to subsection 120.541(3), F.S.

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

RULEMAKING AUTHORITY (formerly "Specific Authority"): 373.044, 373.113, 373.171 FS.

LAW IMPLEMENTED: 373.016, 373.026, 373.036, 373.1501, 373.1502, 373.219, 373.223, 373.4592, 373.4595, 373.470 FS. IF REQUESTED WITHIN 21 DAYS OF THE DATE OF THIS NOTICE, A HEARING WILL BE SCHEDULED AND ANNOUNCED IN THE FAR.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Don Medellin, Principal Scientist, P. O. Box 24680, West Palm Beach, FL 33416-4680, 1(800)432-2045, ext. 6340 or (561)682-6340, dmedelli@sfwmd.gov.

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

40E-10.021 Definitions

- (1) through (6) No change.
- (7) For the Upper Chains of Lakes, Headwaters Revitalization Lakes, and Kissimmee River water reservation, the following definitions apply:
- (a) Lakes Hart-Mary Jane Reservation Waterbodies Lake Hart, Lake Mary Jane, Lake Whippoorwill, Whippoorwill Canal, and the Central and Southern Florida Flood Control Project canals that occur between the S-57 and S-62 structures in Orange and Osceola counties, as depicted in Appendix 4, Figures 4-1 and 4-2A.
- (b) Lakes Myrtle-Preston-Joel Reservation Waterbodies Lake Myrtle, Lake Preston, Lake Joel, Myrtle/Preston Canal, and the Central and Southern Florida Flood Control Project

- canals that occur between the S-57 and S-58 structures in Osceola County, as depicted in Appendix 4, Figures 4-1 and 4-3A.
- (c) East Lake Tohopekaliga Reservation Waterbodies East Lake Tohopekaliga, Fells Cove, Ajay Lake, Lake Runnymede, Runnymede Canal, and the Central and Southern Florida Flood Control Project canals that occur between the S-59 and S-62 structures in Orange and Osceola counties, as depicted in Appendix 4, Figures 4-1 and 4-4A.
- (d) Lake Tohopekaliga Reservation Waterbodies Lake Tohopekaliga and the Central and Southern Florida Flood Control Project canals that occur between the S-59 and S-61 structures in Osceola County, as depicted in Appendix 4, Figures 4-1 and 4-5A.
- (e) Alligator Chain of Lakes Reservation Waterbodies Alligator Chain of Lakes, including Lake Center, Coon Lake, Trout Lake, Lake Lizzie, Brick Lake, Alligator Lake, Live Oak Lake, and Sardine Lake; Center/Coon, Live Oak, Sardine, and Brick canals; and the Central and Southern Florida Flood Control Project canals that occur between the S-58 and S-60 structures in Osceola County, as depicted in Appendix 4, Figures 4-1 and 4-6A.
- (f) Lake Gentry Reservation Waterbodies Lake Gentry and the Central and Southern Florida Flood Control Project canals that occur between the S-60 and S-63A structures in Osceola County, as depicted in Appendix 4, Figures 4-1 and 4-7A.
- (g) Headwaters Revitalization Lakes Reservation Waterbodies Lake Kissimmee, Lake Hatchineha, Tiger Lake, Tiger Creek, Cypress Lake, Zipprer Canal east of the G-103 structure, Jackson Canal downstream of the G-111 structure, and the Central and Southern Florida Flood Control Project canals that occur between the S-61, S-63A, and S-65 structures in Osceola and Polk counties, as depicted in Appendix 4, Figures 4-1 and 4-8A.
- (h) Kissimmee River Reservation Waterbodies The Kissimmee River and its 100-year floodplain between the S-65 and S-65D structures, Istokpoga Canal and the floodplain located east of the S-67 structure; and the C-38 Canal and remnant river channels between the S-65D and S-65E structures in Polk, Osceola, Okeechobee and Highlands counties, as depicted in Appendix 4, Figures 4-1 and 4-9.
- (i) Upper Chain of Lakes Reservation Waterbodies Refers to the collective waterbodies defined in paragraphs (7)(a)–(7)(f) above, as depicted in Figure 4-1.
- (j) Contributing Waterbodies All wetlands and other surface waters, including canals and ditches, that contribute surface water to a reservation waterbody, as depicted in Figures 4-1, 4-4A, 4-5A, 4-6A, 4-7A, 4-8A, and 4-9.
- Rulemaking Authority: 373.044, 373.113, 373.171, F.S. Laws Implemented 373.016, 373.026, 373.036, 373.1501, 373.1502,

373.219, 373.223, 373.4592, 373.4595, 373.470, F.S. History- New 7-2-2009, Amended 3-18-10, 7-21-13, 7-14-14, 7-16-14,

40E-10.031 Water Reservations Implementation

- (1) through (5) No change.
- (6) Water reserved for the protection of fish and wildlife contained within the Upper Chain of Lakes, Headwaters Revitalization Lakes, Kissimmee River, and Contributing Waterbodies is defined in Subsections 40E-10.071(1)-(3), F.A.C. These water reservation rules do not adjudicate property rights or dictate the operation of the Central & Southern Florida Flood Control Project (C&SF Project).

Rulemaking Authority: 373.044, 373.113, 373.171, F.S. Laws Implemented 373.016, 373.026, 373.036, 373.1501, 373.1502, 373.219, 373.223, 373.4592, 373.4595, 373.470, F.S. History- New 7-2-2009, Amended 3-18-10, 7-21-13, 7-14-14, 7-16-14,

<u>40E-10.071 Water Reservation Areas: Upper and Lower Kissimmee Basin Planning Areas</u>

- (1) Upper Chain of Lakes
- (a) Lakes Hart-Mary Jane Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(a), F.A.C.:
- 1. Surface Water: All surface water in Lakes Hart-Mary Jane (Figure 4-2A) up to the water reservation stages depicted in Figure 4-2B and listed in Table 4-2 is reserved from additional allocations.
- 2. Groundwater: Surficial aquifer system groundwater contributing to Lakes Hart-Mary Jane that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (b) Lakes Myrtle-Preston-Joel Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(b), F.A.C.:
- 1.Surface Water: All surface water in Lakes Myrtle-Preston-Joel (Figure 4-3A) up to the water reservation stages depicted in Figure 4-3B and listed in Table 4-3 is reserved from additional allocations.
- 2. Groundwater: Surficial aquifer system groundwater contributing to Lakes Myrtle-Preston-Joel that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (c) East Lake Tohopekaliga Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(c), F.A.C., and Contributing Waterbodies, as defined in paragraph 40E-10.021(7)(j), F.A.C.:
- 1. Surface Water: All surface water in East Lake Tohopekaliga (Figure 4-4A) up to the water reservation stages depicted in Figure 4-4B and listed in Table 4-4 is reserved from additional allocations.

- 2. Groundwater: Surficial aquifer system groundwater contributing to East Lake Tohopekaliga or its contributing waterbodies that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- 3. Contributing Waterbodies: Surface water that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (d) Lake Tohopekaliga Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(d), F.A.C., and Contributing Waterbodies, as defined in paragraph 40E-10.021(7)(j), F.A.C.:
- 1. Surface Water: All surface water in Lake Tohopekaliga (Figure 4-5A) up to the water reservation stages depicted in Figure 4-5B and listed in Table 4-5 is reserved from additional allocations.
- 2. Groundwater: Surficial aquifer system groundwater contributing to Lake Tohopekaliga or its contributing waterbodies that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- 3. Contributing Waterbodies: Surface water that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (e) Alligator Chain of Lakes Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(e), F.A.C., and Contributing Waterbodies, as defined in paragraph 40E-10.021(7)(j), F.A.C.:
- 1. Surface Water: All surface water in the Alligator Chain of Lakes (Figure 4-6A) up to the water reservation stages depicted in Figure 4-6B and listed in Table 4-6 is reserved from additional allocations.
- 2. Groundwater: Surficial aquifer system groundwater contributing to the Alligator Chain of Lakes or its contributing waterbodies that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- 3. Contributing Waterbodies: Surface water that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (f) Lake Gentry Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(f), F.A.C., and Contributing Waterbodies, as defined in paragraph 40E-10.021(7)(j), F.A.C.:
- 1. Surface Water: All surface water in Lake Gentry (Figure 4-7A) up to the water reservation stages depicted in Figure 4-7B and listed in Table 4-7 is reserved from additional allocations.

- 2. Groundwater: Surficial aquifer system groundwater contributing to Lake Gentry or its contributing waterbodies that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- 3. Contributing Waterbodies: Surface water that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (2) Headwaters Revitalization Lakes Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(g), F.A.C., and Contributing Waterbodies, as defined in paragraph 40E-10.021(7)(j), F.A.C.:
- (a) Surface Water: All surface water in the Headwaters Revitalization Lakes (Figure 4-8A; Figure 4-8B; Table 4-8) is reserved from additional allocations.
- (b) Groundwater: Surficial aquifer system groundwater contributing to the Headwaters Revitalization Lakes or their contributing waterbodies that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (c) Contributing Waterbodies: Surface water that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (3) Kissimmee River Reservation Waterbodies, as defined in paragraph 40E-10.021(7)(h), F.A.C., and Contributing Waterbodies, as defined in paragraph 40E-10.021(7)(j), F.A.C.:
- (a) Surface Water: All surface water in the Kissimmee River (Figure 4-9) is reserved from additional allocations in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (b) Groundwater: Surficial aquifer system groundwater contributing to the Kissimmee River or its contributing waterbodies that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (c) Contributing Waterbodies: Surface water that is required for the protection of fish and wildlife is reserved from allocation in accordance with Subsection 3.11.5 of the Applicant's Handbook.
- (4) The reservation contained in this rule and the criteria contained in Subsection 3.11.5 of the "Applicant's Handbook for Water Use Permit Applications within the South Florida Water Management District," incorporated by reference in Rule 40E-2.091, F.A.C., shall be reviewed and revised pursuant to Section 373.223(4), F.S., in light of changed conditions or new information, including any revised regulation schedules.

Rulemaking Authority: 373.044, 373.113, 373.171, F.S. Laws Implemented 373.016, 373.026, 373.036, 373.1501, 373.1502,

373.219, 373.223, 373.4592, 373.4595, 373.470, F.S. History- New

<u>.</u>

## Appendix 4: Upper and Lower Kissimmee Basin Planning Areas

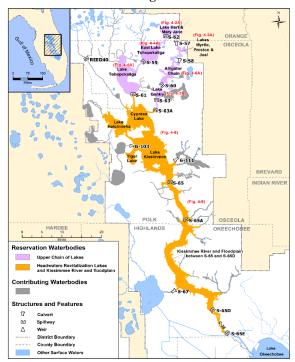


Figure 4-1. Kissimmee River and Chain of Lakes reservation and contributing waterbodies.

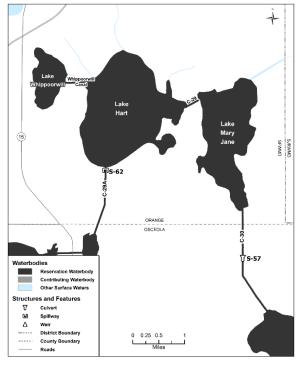


Figure 4-2A. Lakes Hart-Mary Jane reservation waterbodies (no contributing waterbodies present). Unlabeled waterbodies

in this figure are not included in this reservation waterbody group.

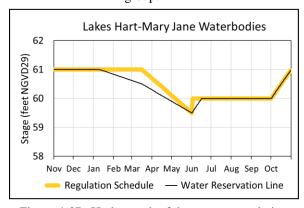


Figure 4-2B. Hydrograph of the current regulation schedule and the water reservation stage at S-62 (water reservation line) for Lakes Hart-Mary Jane reservation waterbodies. The water reservation line is derived from data in Table 4-2.

Table 4-2. Maximum daily water reservation stages at S-62 for Lakes Hart-Mary Jane reservation waterbodies (black line in Figure 4-2B).

D a y	Jan uar y	Febr uary	Ma rch	Ap ril	M ay	Ju ne	Jul y	Au gus t	Septe mber		Nove mber	Dece mber
1	61. 00	60.8	60. 62	60 .2 9	59 .9 0	59 .5 0	60 .0 0	60. 00	60.00	60.0 0	61.00	6 1.00
2	61. 00	60.8	60. 61	60 .2 8	59 .8 9	59 .5 3	60 .0 0	60. 00	60.00	60.0 3	61.00	6 1.00
3	61. 00	60.8	60. 60	60 .2 7	59 .8 8	59 .5 7	60 .0 0	60. 00	60.00	60.0 6	61.00	6 1.00
4	61. 00	60.8	60. 59	60 .2 5	59 .8 6	59 .6 0	60 .0 0	60. 00	60.00	60.1 0	61.00	6 1.00
5	61. 00	60.8	60. 58	60 .2 4	59 .8 5	59 .6 3	60 .0 0	60. 00	60.00	60.1 3	61.00	6 1.00
6	61. 00	60.7 9	60. 58	60 .2 3	59 .8 4	59 .6 7	60 .0 0	60. 00	60.00	60.1 6	61.00	6 1.00

A	D	Jan	- ·			, -			Au	a			
Y   Y   Uary   Ich   It   Ay   Ich   Y   T   The   Ich   I	a				-	M	Ju	Jul				Nove	Dece
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	у	у	uary	rch	ril	ay	ne	У	_	mber	ober	mber	mber
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$		61	60.7	60	60	59	59	60	60		60 1		6
8         61.         60.7         60.         60         59         59         60         60.00         60.00         60.2         3         61.00         6         60         1.00         60.00         60.00         60.2         61.00         60.00         60.00         60.2         61.00         60.00         60.00         60.2         61.00         60.00	7				.2	.8	.7	.0		60.00		61.00	
8       61.       60.7       60.       .2       .8       .7       .0       60.       60.00       63.2       61.00       1.00         9       61.       60.7       60.       60       59       59       60       60.       60.00       60.2       61.00       6         1       61.       60.7       60.       60       59       59       60       60.       60.00       60.2       61.00       6         1       61.       60.7       60.       60       59       59       60       60.00       60.00       60.2       61.00       60.00         1       60.       60.7       60.       60       59       59       60       60.00       60.00       60.3       61.00       60.00         1       60.       60.7       60.       60       59       59       60       60.00       60.00       60.3       61.00       60.00         2       98       5       53       5       6       7       0       60.00       60.00       60.3       61.00       61.00       1.00         1       60.       60.7       60.       60       59       59		00	8	37	1	2	0	0	00		9		1.00
8       00       8       56       0       1       3       0       00       60.00       3       61.00       1.00         9       61.       60.7       60.       60       59       59       60       60.       60.00       60.2       61.00       6         1       61.       60.7       60.       60       59       59       60       60.       60.00       60.2       61.00       6         1       61.       60.7       60.       60       59       59       60       60.       60.00       60.00       60.2       61.00       60.         1       60.       60.7       60.       61.7       8.0       0       60.00       60.00       60.3       61.00       61.00         1       60.       60.7       60.       61.7       8.0       0       60.00       60.00       60.3       61.00       61.00         1       60.       60.7       60.       61.7       8.0       0       00       60.00       60.3       61.00       61.00         1       60.       60.7       60.       61.0       59       59       60       60.0       60.0 <t< td=""><td></td><td>61</td><td>60.7</td><td>60</td><td>60</td><td>59</td><td>59</td><td>60</td><td>60</td><td></td><td>60.2</td><td></td><td>6</td></t<>		61	60.7	60	60	59	59	60	60		60.2		6
9         61.         60.7         60.         60.         59         59         60.         60.         60.0         60.0         60.2         61.00         6         60.00         60.00         60.2         61.00         60.00         60.00         60.2         61.00         60.00<	8				.2	.8	.7	.0		60.00		61.00	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$		00	O	50	0	1	3	0	00		3		1.00
9       00       7       55       1.1       8.8       .7       .0       00       60.00       6       61.00       1.00         1       61.       60.7       60.       60       59       59       60       60.       60.00       60.2       61.00       6         1       60.       60.7       60.       60       59       59       60       60.       60.00       60.3       61.00       6         1       60.       60.7       60.       60       59       59       60       60.00       60.3       61.00       6         1       60.       60.7       60.       60       59       59       60       60.00       60.3       61.00       6         2       98       5       53       5       6       7       0       60.00       60.3       61.00       6         3       98       4       52       6       7       0       60.00       60.00       60.3       61.00       61.00         4       97       3       52       2       3       3       0       60.00       60.00       60.4       61.00       61.00		61.	60.7	60.	60	59	59	60	60.		60.2		6
1       61.       60.7       60.       60.       59       59       60.<	9					.8	.7	.0		60.00		61.00	
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$			,		9	0	7	0	-				1.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	1	61.	60.7	60.					60.		60.2		6
1       60.       60.7       60.       60       59       59       60       60.       60.00       60.00       60.3       61.00       6       61.00       61.00       60.100       60.3       61.00<	0									60.00		61.00	
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$													
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	1	60.	60.7	60.					60.		60.3		6
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	1	99	5	54					00	60.00		61.00	1.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$													
1       60.       60.7       60.       60       59       59       60       60. <td>1</td> <td>60.</td> <td>60.7</td> <td>60.</td> <td></td> <td></td> <td></td> <td></td> <td>60.</td> <td></td> <td>60.3</td> <td></td> <td>6</td>	1	60.	60.7	60.					60.		60.3		6
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	2	98	5	53					00	60.00	5	61.00	1.00
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$													
3       98       4       52       4       5       0       0       00       9       1.00         1       60.       60.7       60.       60       59       59       60       60.       60.4       61.00       61.00       61.00         1       60.       60.7       60.       60       59       59       60       60.       60.00       60.4       61.00       6         5       96       2       51       1       .7       .9       .0       60.       60.00       60.4       61.00       6         1       60.       60.7       60.       .1       .7       .9       .0       60.       60.00       60.4       61.00       6         6       95       2       50       .1       .7       .0       .0       60.       60.00       60.4       61.00       61.00       61.00         1       60.       60.7       60.       60       59       60       60.       60.       60.00       60.5       60.00       60.5       61.00       60.         1       60.       60.7       60.       60       59       60       60.       60.	1	60.	60.7	60.					60.	co 00	60.3	<i>c</i> 1 00	6
1       60.       60.7       60.       60       59       59       60       60.       60.       60.4       61.00       6         4       97       3       52       2       3       3       0       60.       60.00       60.4       61.00       6         1       60.       60.7       60.       .1       .7       .9       .0       60.       60.00       60.4       61.00       6         5       96       2       51       1       .7       .9       .0       60.       60.00       60.4       61.00       6         1       60.       60.7       60.       .1       .7       .0       .0       60.       60.00       60.4       61.00       6         6       95       2       50       .1       .7       .0       .0       60.       60.00       60.4       61.00       61.00       61.00         1       60.       60.7       60.       .0       .0       .0       60.       60.0       60.5       61.00       61.00       61.00         1       60.       60.7       60.       60       59       60       60       60.	3	98	4	52					00	60.00	9	61.00	1.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$													
1       60.       60.7       60.       60       59       59       60       60.       60.00       60.4       61.00       6         5       96       2       51       1.7       .9       .0       60.       60.00       60.4       61.00       6         1       60.       60.7       60.       60       59       60       60.	1	60.	60.7	60.					60.	co oo	60.4	<i>c</i> 1 00	6
1       60.       60.7       60.       60       59       59       60       60.       60.       60.4       61.00       6         5       96       2       51       1       .7       .9       .0       60.       60.00       60.4       61.00       6         1       60.       60.7       60.       .1       .7       .0       .0       60.       60.00       60.4       61.00       6         1       60.       60.7       60.       .1       .7       .0       .0       60.       60.00       60.4       61.00       61.00       61.00         1       60.       60.7       60.       60       59       60       60.       60.       60.00       60.5       61.00       61.00         1       60.       60.7       60.       60       59       60       60.       60.       60.00       60.5       61.00       61.00         1       60.       60.6       60       59       60       60       60.       60.00       60.5       60.5       61.00       1.00         1       60.       60.6       60       59       60       60       60.	4	97	3	52					00	00.00	2	61.00	1.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$													
1     60.     60.7     60.     .1     .7     .0     .0     60.     60.4     61.00     61.00       1     60.     60.7     60.     .1     .7     .0     .0     60.     60.00     60.4     61.00     61.00       1     60.     60.7     60.     60     59     60     60     60.     60.     60.     60.5     61.00     6       7     95     1     49     8     9     0     0     60.     60.5     61.00     6       1     60.     60.7     60.     60     59     60     60     60.     60.     60.5     61.00     6       8     94     0     47     7     8     0     0     60.0     60.5     61.00     6       1     60.     60.6     60     59     60     60     60.     60.5     60.5     60.5     60.5	1	60.	60.7	60.					60.	60.00	60.4	61.00	6
1     60.     60.7     60.     60     59     60     60.     60.     60.     60.4     61.00     6       1     60.     95     2     50     0     1     0     0     60.     60.00     60.4     61.00     6       1     60.     60.7     60.     60     59     60     60     60.     60.     60.5     61.00     6       7     95     1     49     8     9     0     0     60.     60.5     61.00     6       1     60.     60.7     60.     .0     .6     .0     .0     60.     60.     60.5     61.00     6       8     94     0     47     7     8     0     0     60.0     60.5     61.00     61.00       1     60.     60.6     60     59     60     60     60.     60.5     60.5     60.5	5	96	2	51					00	00.00	5	01.00	1.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$													
6     95     2     50     0     1     0     0     00     8     1.00       1     60.     60.7     60.     60     59     60     60     60.     60.     60.     60.5     61.00     6       7     95     1     49     8     9     0     0     60.     60.     60.5     61.00     6       1     60.     60.7     60.     .0     .6     .0     .0     60.     60.     60.5     61.00     6       8     94     0     47     7     8     0     0     60.00     60.5     61.00     6       1     60.     60.6     60     59     60     60     60.     60.5     60.5     60.5	1	60.	60.7	60.					60.	60.00	60.4	61.00	6
1     60.     60.7     60.     60     59     60     60     60.     60.     60.     60.00     60.5     61.00     6       7     95     1     49     8     9     0     0     00     60.00     60.5     61.00     6       1     60.     60.7     60.     60     59     60     60     60.     60.00     60.5     61.00     6       8     94     0     47     7     8     0     0     60.00     60.5     61.00     6       1     60.     60.6     60     59     60     60     60.     60.5     60.5     60.5	6	95	2	50					00	00.00	8	01.00	1.00
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$													
1     60.     60.7     60.     60     59     60     60.	1	60.	60.7	60.					60.	60 00		61 00	6
1 60. 60.7 60. 60 59 60 60 60. 60.00 60.5 61.00 6 8 94 0 47 7 8 0 0 60. 60. 60.5 61.00 6 1 60. 60.6 60. 60 59 60 60 60. 60. 60.5	7	95	1	49					00	00.00	2	01.00	1.00
1     60.     60.7     60.     .0     .6     .0     .0     60.     60.00     60.5     61.00     6       1     60.     60.6     60.     60     59     60     60     60.     60.     60.5     60.5     60.5													
8     94     0     47     7     8     0     0     00     5     1.00       1     60     60     60     60     59     60     60     60     60     60     60	1	60.		60.						60.00		61.00	
1 60, 60,6 60, 60 59 60 60 60, 60,5 60	8	94	0	47					00	30.00	5	32.00	1.00
1   60,   60,6   60,													
1   1.01.01   100.001   10.10.10.101   1					.0	.6	.0	.0		60.00		61.00	
9 93 9 46 6 7 0 0 0 0 8 100 1.00	9	93	9	46					00		8		1.00

D	Jan					Į.		Au	~			_
a	uar	Febr		•	M	Ju	Jul	gus	Septe	Oct		Dece
у	у	uary	rch	ril	ay	ne	у	t	mber	ober	mber	mber
				60	59	60	60					
2	60.	60.6	60.	.0	.6	.0	.0	60.	60.00	60.6	61.00	6
0	92	8	45	5	6	0	0	00		1		1.00
	<b>60</b>	60.6	<b>CO</b>	60	59	60	60	<b>60</b>		<i>c</i> 0 <i>c</i>		
2	60.	60.6	60.	.0	.6	.0	.0	60.	60.00	60.6	61.00	1.00
1	92	8	44	3	4	0	0	00		5		1.00
2	60	60.6	60.	60	59	60	60	60		60.6		6
2 2	60. 91	60.6	42	.0	.6	.0	.0	60. 00	60.00	60.6 8	61.00	6 1.00
2	91	/	42	2	3	0	0	00		0		1.00
2	60.	60.6	60.	60	59	60	60	60.		60.7		6
3	90	6	41	.0	.6	.0	.0	00.	60.00	1	61.00	1.00
3	90	0	41	1	2	0	0	00		1		1.00
2	60.	60.6	60.	59	59	60	60	60.		60.7		6
4	89	5	40	.9	.6	.0	.0	00.	60.00	4	61.00	1.00
7	0)	3	40	9	0	0	0	00		7		1.00
2	60.	60.6	60.	59	59	60	60	60.		60.7		6
5	88	5	38	.9	.5	.0	.0	00	60.00	7	61.00	1.00
5	00	3	50	8	9	0	0	00		,		1.00
2	60.	60.6	60.	59	59	60	60	60.		60.8		6
6	88	4	37	.9	.5	.0	.0	00	60.00	1	61.00	1.00
	-	•		7	8	0	0					1.00
2	60.	60.6	60.	59	59	60	60	60.		60.8		6
7	87	3	36	.9	.5	.0	.0	00	60.00	4	61.00	1.00
				5	6	0	0	-				
2	60.	60.6	60.	59	59	60	60	60.		60.8		6
8	86	2	34	.9	.5	.0	0.	00	60.00	7	61.00	1.00
				4	5	0	0					
2	60.		60.	59	59	60	60	60.		60.9		6
9	85		33	.9	.5	0.	0.	00	60.00	0	61.00	1.00
				3	4	0	0					
3	60.		60.	59	59	60	60	60.		60.9		6
0	85		32	.9	.5	0.	0.	00	60.00	4	61.00	1.00
				2	3	0	0					
3	60.		60.		59		60	60.		60.9		6
1	84		31		.5		0.	00		7		1.00
					1		0					

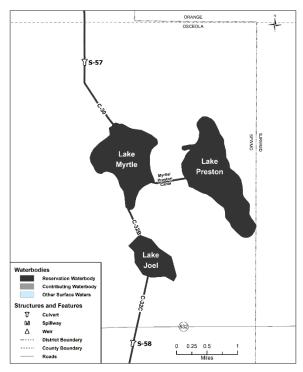


Figure 4-3A. Lakes Myrtle-Preston-Joel reservation waterbodies (no contributing waterbodies present). Unlabeled waterbodies in this figure are not included in this reservation waterbody group.

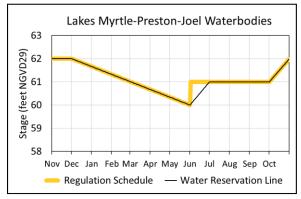


Figure 4-3B. Hydrograph of the current regulation schedule and the water reservation stage at S-57 (water reservation line) for Lakes Myrtle-Preston-Joel reservation waterbodies. The water reservation line is derived from data in Table 4-3.

Table 4-3. Maximum daily water reservation stages at S-57 for Lakes Myrtle-Preston-Joel reservation waterbodies (black line in Figure 4-3B).

D	Jan	E-l-	Ma	Λ	M	T	T1	Au	C 4 -	0-4	NI	D
a	uar	Febr uary	Ma rch	_	M ay	Ju ne	Jul y	gus	Septe mber	Oct ober	Nove mber	Dece mber
у	у	uai y	TCII	111	ау	пс	y	t	moci	obci	moci	moci
1	61. 66	61.3	61. 01	60 .6 7	60 .3 4	60 .0 0	61 .0 0	61. 00	61.00	61.0 0	62.00	62.00
2	61. 65	61.3 1	61. 00	60 .6 6	60 .3 3	60 .0 3	61 .0 0	61. 00	61.00	61.0 3	62.00	61.99
3	61. 64	61.3 0	60. 99	60 .6 5	60 .3 2	60 .0 7	61 .0 0	61. 00	61.00	61.0 6	62.00	61.98
4	61. 63	61.2 9	60. 98	60 .6 4	60 .3 1	60 .1 0	61 .0 0	61. 00	61.00	61.1 0	62.00	61.97
5	61. 62	61.2 7	60. 97	60 .6 3	60 .3 0	60 .1 3	61 .0 0	61. 00	61.00	61.1 3	62.00	61.96
6	61. 60	61.2	60. 96	60 .6 2	60 .2 9	60 .1 7	61 .0 0	61. 00	61.00	61.1 6	62.00	61.95
7	61. 59	61.2	60. 94	60 .6 0	60 .2 7	60 .2 0	61 .0 0	61. 00	61.00	61.1 9	62.00	61.93
8	61. 58	61.2	60. 93	60 .5 9	60 .2 6	60 .2 3	61 .0 0	61. 00	61.00	61.2	62.00	61.92
9	61. 57	61.2	60. 92	60 .5 8	60 .2 5	60 .2 7	61 .0 0	61. 00	61.00	61.2 6	62.00	61.91
1 0	61. 56	61.2	60. 91	60 .5 7	60 .2 4	60 .3 0	61 .0 0	61. 00	61.00	61.2 9	62.00	61.90
1	61. 55	61.2	60. 90	60 .5 6	60 .2 3	60 .3 3	61 .0 0	61. 00	61.00	61.3	62.00	61.89
1 2	61. 54	61.2 0	60. 89	60 .5 5	60 .2 2	60 .3 7	61 .0 0	61. 00	61.00	61.3 5	62.00	61.88
1 3	61. 53	61.1 9	60. 88	60 .5 4	60 .2 1	60 .4 0	61 .0 0	61. 00	61.00	61.3 9	62.00	61.87

D	Jan	Febr	Ma	An	M	Ju	Jul	Au	Septe	Oct	Nove	Dece
a	uar	uary	rch	ril	ay	ne	у	gus t	mber	ober		mber
1	у 61.	61.1	60.	60	60	60	61	61.	61.00	61.4	62.00	61.86
4	52	8	87	3	0	3	0	00		2		
1 5	61. 51	61.1 6	60. 86	60 .5 2	60 .1 9	60 .4 7	61 .0 0	61. 00	61.00	61.4 5	62.00	61.85
1 6	61. 49	61.1	60. 85	60 .5 1	60 .1 8	60 .5 0	61 .0 0	61. 00	61.00	61.4	62.00	61.84
1 7	61. 48	61.1	60. 84	60 .4 9	60 .1 6	60 .5 3	61 .0 0	61. 00	61.00	61.5	62.00	61.83
1 8	61. 47	61.1	60. 82	60 .4 8	60 .1 5	60 .5 7	61 .0 0	61. 00	61.00	61.5 5	62.00	61.81
1 9	61. 46	61.1	60. 81	60 .4 7	60 .1 4	60 .6 0	61 .0 0	61. 00	61.00	61.5 8	62.00	61.80
2	61. 45	61.1	60. 80	60 .4 6	60 .1 3	60 .6 3	61 .0 0	61. 00	61.00	61.6 1	62.00	61.79
2	61. 44	61.1	60. 79	60 .4 5	60 .1 2	60 .6 7	61 .0 0	61. 00	61.00	61.6 5	62.00	61.78
2 2	61. 43	61.0 9	60. 78	60 .4 4	60 .1 1	60 .7 0	61 .0 0	61. 00	61.00	61.6 8	62.00	61.77
2	61. 42	61.0 8	60. 77	60 .4 3	60 .1 0	60 .7 3	61 .0 0	61. 00	61.00	61.7 1	62.00	61.76
2 4	61. 41	61.0 7	60. 76	60 .4 2	60 .0 9	60 .7 7	61 .0 0	61. 00	61.00	61.7 4	62.00	61.75
2 5	61. 40	61.0	60. 75	60 .4 1	60 .0 8	60 .8 0	61 .0 0	61. 00	61.00	61.7 7	62.00	61.74
2	61. 38	61.0	60. 74	60 .4 0	60 .0 7	60 .8 3	61 .0 0	61. 00	61.00	61.8	62.00	61.73

D	Jan	Febr	Ma	Ap	M	Ju	Jul	Au	Septe	Oct	Nove	Dece
a	uar	uary		_	ay		У	gus	_		mber	
у	у	uai y	1011	111	ay	110	y	t	moer	OUCI	moci	moer
2	61.	61.0	60.	60	60	60	61	61.		61.8		
7	37	3	73	.3	0.	.8	0.	00	61.00	4	62.00	61.72
/	31	3	13	8	5	7	0	00		4		
2	61.	61.0	60.	60	60	60	61	61.		61.8		
				.3	.0	.9	.0		61.00	7	62.00	61.70
8	36	2	71	7	4	0	0	00		/		
2	61.		60.	60	60	60	61	61.		61.9		
				.3	.0	.9	.0		61.00		62.00	61.69
9	35		70	6	3	3	0	00		0		
3	61.		60.	60	60	60	61	61.		61.9		
			69	.3	0.	.9	.0	00	61.00	4	62.00	61.68
0	34		09	5	2	7	0	00		4		
3	61.		60.		60		61	61.		61.9		
					.0		.0			7		61.67
1	33		68		1		0	00		/		

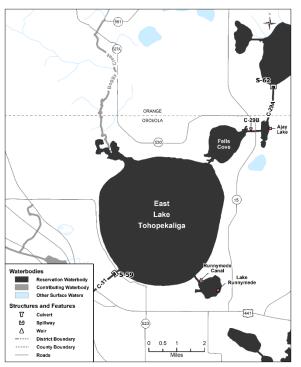


Figure 4-4A. East Lake Tohopekaliga reservation and contributing waterbodies. Unlabeled waterbodies in this figure are not included in this reservation/contributing waterbody group.

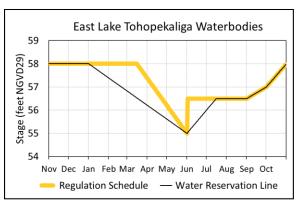


Figure 4-4B. Hydrograph of the current regulation schedule and the water reservation stage at S-59 (water reservation line) for East Lake Tohopekaliga reservation waterbodies. The water reservation line is derived from data in Table 4-4.

Table 4-4. Maximum daily water reservation stages at S-59 for East Lake Tohopekaliga reservation waterbodies (black line in Figure 4-4B).

D a y	Jan uar y	Febr uary	Ma rch	Ap ril	M ay	Ju ne	Jul y	Au gus t	Septe mber		Nove mber	Dece mber
1	58. 00	57.3 8	56. 83	56 .2 1	55 .6 2	55 .0 0	56 .0 0	56. 50	56.50	57.0 0	58.00	58.00
2	57. 98	57.3 6	56. 81	56 .1 9	55 .6 0	55 .0 3	56 .0 3	56. 50	56.52	57.0 3	58.00	58.00
3	57. 96	57.3 4	56. 79	56 .1 7	55 .5 8	55 .0 7	56 .0 7	56. 50	56.53	57.0 6	58.00	58.00
4	57. 94	57.3 2	56. 77	56 .1 5	55 .5 6	55 .1 0	56 .1 0	56. 50	56.55	57.1 0	58.00	58.00
5	57. 92	57.3 0	56. 75	56 .1 3	55 .5 4	55 .1 3	56 .1 3	56. 50	56.57	57.1 3	58.00	58.00
6	57. 90	57.2 8	56. 73	56 .1 1	55 .5 2	55 .1 7	56 .1 7	56. 50	56.58	57.1 6	58.00	58.00
7	57. 88	57.2 6	56. 71	56 .0 9	55 .5 0	55 .2 0	56 .2 0	56. 50	56.60	57.1 9	58.00	58.00
8	57. 86	57.2 5	56. 69	56 .0 7	55 .4 8	55 .2 3	56 .2 3	56. 50	56.62	57.2 3	58.00	58.00
9	57. 84	57.2 3	56. 67	56 .0 5	55 .4 6	55 .2 7	56 .2 7	56. 50	56.63	57.2 6	58.00	58.00

	Ι	1				I			1		ı	1
1	57. 82	57.2 1	56. 65	.0	55 .4	.3	.3	56. 50	56.65	57.2 9	58.00	58.00
				3	4	0	0					
1	57. 80	57.1 9	56. 63	56 .0 1	55 .4 2	55 .3 3	56 .3 3	56. 50	56.67	57.3 2	58.00	58.00
1 2	57. 78	57.1 7	56. 61	55 .9 9	55 .4 0	55 .3 7	56 .3 7	56. 50	56.68	57.3 5	58.00	58.00
1 3	57. 76	57.1 5	56. 59	55 .9 7	55 .3 8	55 .4 0	56 .4 0	56. 50	56.70	57.3 9	58.00	58.00
1 4	57. 74	57.1 3	56. 57	55 .9 5	55 .3 6	55 .4 3	56 .4 3	56. 50	56.72	57.4 2	58.00	58.00
1 5	57. 72	57.1 1	56. 55	55 .9 3	55 .3 4	55 .4 7	56 .4 7	56. 50	56.73	57.4 5	58.00	58.00
1 6	57. 70	57.0 9	56. 53	55 .9 1	55 .3 2	55 .5 0	56 .5 0	56. 50	56.75	57.4 8	58.00	58.00
1 7	57. 68	57.0 7	56. 51	55 .8 9	55 .3 0	55 .5 3	56 .5 0	56. 50	56.77	57.5 2	58.00	58.00
1	57. 66	57.0 5	56. 49	55 .8 7	55 .2 8	55 .5 7	56 .5 0	56. 50	56.78	57.5 5	58.00	58.00
1 9	57. 64	57.0 3	56. 47	55 .8 5	55 .2 6	55 .6 0	56 .5 0	56. 50	56.80	57.5 8	58.00	58.00
2	57. 62	57.0 1	56. 45	55 .8 3	55 .2 4	55 .6 3	56 .5 0	56. 50	56.82	57.6 1	58.00	58.00
2	57. 60	56.9 9	56. 43	55 .8 1	55 .2 2	55 .6 7	56 .5 0	56. 50	56.83	57.6 5	58.00	58.00
2 2	57. 58	56.9 7	56. 41	55 .7 9	55 .2 0	55 .7 0	56 .5 0	56. 50	56.85	57.6 8	58.00	58.00
2 3	57. 56	56.9 5	56. 39	55 .7 7	55 .1 8	55 .7 3	56 .5 0	56. 50	56.87	57.7 1	58.00	58.00
2 4	57. 54	56.9 3	56. 37	55 .7 5	55 .1 6	55 .7 7	56 .5 0	56. 50	56.88	57.7 4	58.00	58.00
2 5	57. 52	56.9 1	56. 35	55 .7 4	55 .1 4	55 .8 0	56 .5 0	56. 50	56.90	57.7 7	58.00	58.00

2	57. 50	56.8 9	56. 33	55 .7 2	55 .1 2	55 .8 3	56 .5 0	56. 50	56.92	57.8 1	58.00	58.00
2 7	57. 48	56.8 7	56. 31	55 .7 0	55 .1 0	55 .8 7	56 .5 0	56. 50	56.93	57.8 4	58.00	58.00
2	57. 46	56.8 5	56. 29	55 .6 8	55 .0 8	55 .9 0	56 .5 0	56. 50	56.95	57.8 7	58.00	58.00
2 9	57. 44		56. 27	55 .6 6	55 .0 6	55 .9 3	56 .5 0	56. 50	56.97	57.9 0	58.00	58.00
3	57. 42		56. 25	55 .6 4	55 .0 4	55 .9 7	56 .5 0	56. 50	56.98	57.9 4	58.00	58.00
3	57. 40		56. 23		55 .0 2		56 .5 0	56. 50		57.9 7		58.00

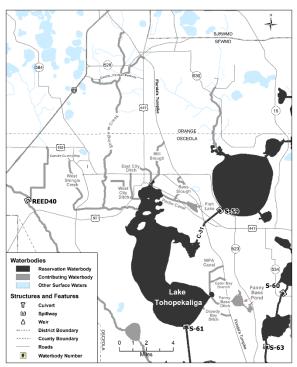


Figure 4-5A. Lake Tohopekaliga reservation and contributing waterbodies. Unlabeled waterbodies in this figure are not included in this reservation/contributing waterbody group.

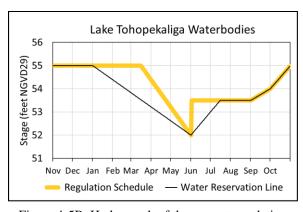


Figure 4-5B. Hydrograph of the current regulation schedule and the water reservation stage at S-61 (water reservation line) for Lake Tohopekaliga reservation waterbodies. The water reservation line is derived from data in Table 4-5.

Table 4-5. Maximum daily water reservation stages at S-61 for Lake Tohopekaliga reservation waterbodies (black line in Figure 4-5B).

D a y	Jan uar y	Febr uary	Ma rch	Ap ril	M ay	Ju ne	Jul y	Au gus t	Septe mber		Nove mber	Dece mber
1	55. 00	54.3 8	53. 83	53 .2 1	52 .6 2	52 .0 0	53 .0 0	53. 50	53.50	54.0 0	55.00	55.00
2	54. 98	54.3 6	53. 81	53 .1 9	52 .6 0	52 .0 3	53 .0 3	53. 50	53.52	54.0 3	55.00	55.00
3	54. 96	54.3 4	53. 79	53 .1 7	52 .5 8	52 .0 7	53 .0 7	53. 50	53.53	54.0 6	55.00	55.00
4	54. 94	54.3 2	53. 77	53 .1 5	52 .5 6	52 .1 0	53 .1 0	53. 50	53.55	54.1 0	55.00	55.00
5	54. 92	54.3 0	53. 75	53 .1 3	52 .5 4	52 .1 3	53 .1 3	53. 50	53.57	54.1 3	55.00	55.00
6	54. 90	54.2 8	53. 73	53 .1 1	52 .5 2	52 .1 7	53 .1 7	53. 50	53.58	54.1 6	55.00	55.00
7	54. 88	54.2 6	53. 71	53 .0 9	52 .5 0	52 .2 0	53 .2 0	53. 50	53.60	54.1 9	55.00	55.00

D a	Jan uar	Febr	Ma	_	M	Ju	Jul	Au gus	Septe	Oct	Nove	Dece
у	у	uary	rch	ril	ay	ne	У	t	mber	ober	mber	mber
8	54. 86	54.2 5	53. 69	53 .0 7	52 .4 8	52 .2 3	53 .2 3	53. 50	53.62	54.2 3	55.00	55.00
9	54. 84	54.2 3	53. 67	53 .0 5	52 .4 6	52 .2 7	53 .2 7	53. 50	53.63	54.2 6	55.00	55.00
1 0	54. 82	54.2 1	53. 65	53 .0 3	52 .4 4	52 .3 0	53 .3 0	53. 50	53.65	54.2 9	55.00	55.00
1	54. 80	54.1 9	53. 63	53 .0 1	52 .4 2	52 .3 3	53 .3 3	53. 50	53.67	54.3 2	55.00	55.00
1 2	54. 78	54.1 7	53. 61	52 .9 9	52 .4 0	52 .3 7	53 .3 7	53. 50	53.68	54.3 5	55.00	55.00
1 3	54. 76	54.1 5	53. 59	52 .9 7	52 .3 8	52 .4 0	53 .4 0	53. 50	53.70	54.3 9	55.00	55.00
1 4	54. 74	54.1 3	53. 57	52 .9 5	52 .3 6	52 .4 3	53 .4 3	53. 50	53.72	54.4 2	55.00	55.00
1 5	54. 72	54.1	53. 55	52 .9 3	52 .3 4	52 .4 7	53 .4 7	53. 50	53.73	54.4 5	55.00	55.00
1 6	54. 70	54.0 9	53. 53	52 .9 1	52 .3 2	52 .5 0	53 .5 0	53. 50	53.75	54.4 8	55.00	55.00
1 7	54. 68	54.0 7	53. 51	52 .8 9	52 .3 0	52 .5 3	53 .5 0	53. 50	53.77	54.5 2	55.00	55.00
1 8	54. 66	54.0 5	53. 49	52 .8 7	52 .2 8	52 .5 7	53 .5 0	53. 50	53.78	54.5 5	55.00	55.00
1 9	54. 64	54.0 3	53. 47	52 .8 5	52 .2 6	52 .6 0	53 .5 0	53. 50	53.80	54.5 8	55.00	55.00
2 0	54. 62	54.0 1	53. 45	52 .8 3	52 .2 4	52 .6 3	53 .5 0	53. 50	53.82	54.6 1	55.00	55.00

D a	Jan uar	Febr uary	Ma rch	Ap ril	M ay	Ju ne	Jul y	Au gus	Septe mber	Oct ober	Nove mber	Dece mber
У	У				•		,	t				
2	54. 60	53.9 9	53. 43	52 .8 1	52 .2 2	52 .6 7	53 .5 0	53. 50	53.83	54.6 5	55.00	55.00
2 2	54. 58	53.9 7	53. 41	52 .7 9	52 .2 0	52 .7 0	53 .5 0	53. 50	53.85	54.6 8	55.00	55.00
2 3	54. 56	53.9 5	53. 39	52 .7 7	52 .1 8	52 .7 3	53 .5 0	53. 50	53.87	54.7 1	55.00	55.00
2 4	54. 54	53.9	53. 37	52 .7 5	52 .1 6	52 .7 7	53 .5 0	53. 50	53.88	54.7 4	55.00	55.00
2 5	54. 52	53.9 1	53. 35	52 .7 4	52 .1 4	52 .8 0	53 .5 0	53. 50	53.90	54.7 7	55.00	55.00
2 6	54. 50	53.8 9	53. 33	52 .7 2	52 .1 2	52 .8 3	53 .5 0	53. 50	53.92	54.8 1	55.00	55.00
2 7	54. 48	53.8 7	53. 31	52 .7 0	52 .1 0	52 .8 7	53 .5 0	53. 50	53.93	54.8 4	55.00	55.00
2 8	54. 46	53.8 5	53. 29	52 .6 8	52 .0 8	52 .9 0	53 .5 0	53. 50	53.95	54.8 7	55.00	55.00
2	54. 44		53. 27	52 .6 6	52 .0 6	52 .9 3	53 .5 0	53. 50	53.97	54.9 0	55.00	55.00
3	54. 42		53. 25	52 .6 4	52 .0 4	52 .9 7	53 .5 0	53. 50	53.98	54.9 4	55.00	55.00
3	54. 40		53. 23		52 .0 2		53 .5 0	53. 50		54.9 7		55.00

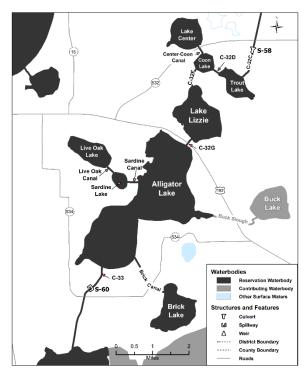


Figure 4-6A. Alligator Chain of Lakes reservation and contributing waterbodies. Unlabeled waterbodies in this figure are not included in this reservation/contributing waterbody group.

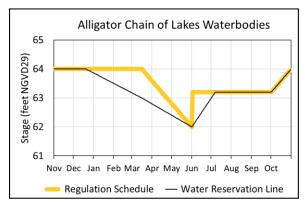


Figure 4-6B. Hydrograph of the current regulation schedule and the water reservation stage at S-60 (water reservation line) for Alligator Chain of Lakes reservation waterbodies. The water reservation line is derived from data in Table 4-6.

Table 4-6. Maximum daily water reservation stages at S-60 for Alligator Chain of Lakes reservation waterbodies (black line in Figure 4-6B).

D	Jan	г 1			1.6	т	T 1	Au	g ,	0.4	NT	<b>D</b>
a	uar	Febr		•	M	Ju	Jul	gus	Septe	Oct		Dece
у	у	uary	rch	ril	ay	ne	У	t	mber	ober	mber	mber
1	63. 86	63.5 0	63. 17	62 .7 9	62 .4 0	62 .0 0	63 .0 0	63. 20	63.20	63.2 0	64.00	64.00
2	63. 85	63.4 9	63. 16	62 .7 8	62 .3 9	62 .0 3	63 .0 3	63. 20	63.20	63.2	64.00	64.00
3	63. 84	63.4 8	63. 15	62 .7 7	62 .3 8	62 .0 7	63 .0 7	63. 20	63.20	63.2	64.00	64.00
4	63. 83	63.4 7	63. 14	62 .7 5	62 .3 6	62 .1 0	63 .1 0	63. 20	63.20	63.2 8	64.00	64.00
5	63. 81	63.4 5	63. 13	62 .7 4	62 .3 5	62 .1 3	63 .1 3	63. 20	63.20	63.3 0	64.00	64.00
6	63. 80	63.4 4	63. 12	62 .7 3	62 .3 4	62 .1 7	63 .1 7	63. 20	63.20	63.3 3	64.00	64.00
7	63. 79	63.4	63. 10	62 .7 1	62 .3 2	62 .2 0	63 .2 0	63. 20	63.20	63.3 5	64.00	64.00
8	63. 78	63.4	63. 09	62 .7 0	62 .3 1	62 .2 3	63 .2 0	63. 20	63.20	63.3 8	64.00	64.00
9	63. 77	63.4 1	63. 08	62 .6 9	62 .3 0	62 .2 7	63 .2 0	63. 20	63.20	63.4 1	64.00	64.00
1	63. 76	63.4	63. 07	62 .6 8	62 .2 9	62 .3 0	63 .2 0	63. 20	63.20	63.4 3	64.00	64.00
1	63. 74	63.3 8	63. 06	62 .6 6	62 .2 7	62 .3 3	63 .2 0	63. 20	63.20	63.4 6	64.00	64.00
1 2	63. 73	63.3 7	63. 05	62 .6 5	62 .2 6	62 .3 7	63 .2 0	63. 20	63.20	63.4 8	64.00	64.00
1 3	63. 72	63.3 6	63. 03	62 .6 4	62 .2 5	62 .4 0	63 .2 0	63. 20	63.20	63.5 1	64.00	64.00

D	Jan	F.1.	M.	<b>A</b>	<b>N</b> 4	т	T 1	Au	G 4 .	0.4	NT.	D
a	uar	Febr		•		Ju	Jul	gus	Septe	Oct	Nove	
у	у	uary	rch	ril	ay	ne	У	t	mber	ober	mber	mber
1 4	63. 71	63.3	63. 02	62 .6 2	62 .2 3	62 .4 3	63 .2 0	63. 20	63.20	63.5 4	64.00	64.00
1 5	63. 70	63.3	63. 01	62 .6 1	62 .2 2	62 .4 7	63 .2 0	63. 20	63.20	63.5 6	64.00	64.00
1	63. 69	63.3	63. 00	62 .6 0	62 .2 1	62 .5 0	63 .2 0	63. 20	63.20	63.5 9	64.00	64.00
1 7	63. 67	63.3 1	62. 99	.5 8	62 .1 9	.5 3	63 .2 0	63. 20	63.20	63.6 1	64.00	64.00
1 8	63. 66	63.3	62. 97	62 .5 7	62 .1 8	62 .5 7	63 .2 0	63. 20	63.20	63.6 4	64.00	64.00
1 9	63. 65	63.2 9	62. 96	62 .5 6	62 .1 7	62 .6 0	63 .2 0	63. 20	63.20	63.6 6	64.00	64.00
2	63. 64	63.2 8	62. 95	.5 5	62 .1 6	.6 .6 3	63 .2 0	63. 20	63.20	63.6 9	64.00	64.00
2	63. 63	63.2 7	62. 94	62 .5 3	62 .1 4	62 .6 7	63 .2 0	63. 20	63.20	63.7 2	64.00	63.99
2 2	63. 62	63.2 6	62. 92	.5 2	62 .1 3	62 .7 0	63 .2 0	63. 20	63.20	63.7 4	64.00	63.98
2	63. 60	63.2 4	62. 91	.5 1	62 .1 2	62 .7 3	63 .2 0	63. 20	63.20	63.7 7	64.00	63.97
2 4	63. 59	63.2	62. 90	62 .4 9	62 .1 0	62 .7 7	63 .2 0	63. 20	63.20	63.7 9	64.00	63.95
2 5	63. 58	63.2	62. 88	62 .4 8	62 .0 9	62 .8 0	63 .2 0	63. 20	63.20	63.8	64.00	63.94
2	63. 57	63.2 1	62. 87	62 .4 7	62 .0 8	62 .8 3	63 .2 0	63. 20	63.20	63.8 5	64.00	63.93

D a y	Jan uar y	Febr uary		_	M ay	Ju ne	Jul y	Au gus t	_		Nove mber	
2 7	63. 56	63.2	62. 86	62 .4 5	62 .0 6	62 .8 7	63 .2 0	63. 20	63.20	63.8 7	64.00	63.92
2 8	63. 55	63.1 9	62. 84	62 .4 4	62 .0 5	62 .9 0	63 .2 0	63. 20	63.20	63.9 0	64.00	63.91
2 9	63. 53		62. 83	62 .4 3	62 .0 4	62 .9 3	63 .2 0	63. 20	63.20	63.9 2	64.00	63.90
3	63. 52		62. 82	62 .4 2	62 .0 3	62 .9 7	63 .2 0	63. 20	63.20	63.9 5	64.00	63.88
3	63. 51		62. 81		62 .0 1		63 .2 0	63. 20		63.9 7		63.87

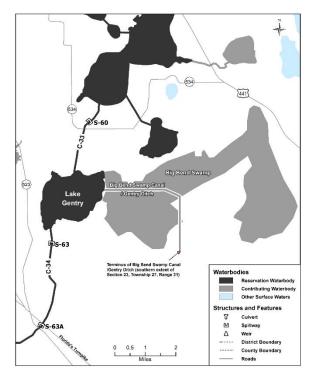


Figure 4-7A. Lake Gentry reservation and contributing waterbodies. Unlabeled waterbodies in this figure are not included in this reservation/contributing waterbody group.

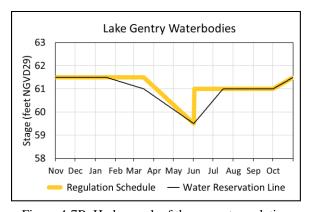


Figure 4-7B. Hydrograph of the current regulation schedule and the water reservation stage at S-63 (water reservation line) for Lake Gentry reservation waterbodies. The water reservation line is derived from data in Table 4-7.

Table 4-7. Maximum daily water reservation stages at S-63 for Lake Gentry reservation waterbodies (black line in

Figure 4-7B).

D a y	Jan uar y	Febr uary		Ap ril	M ay	Ju ne	Jul y	Au gus t	Septe mber		Nove mber	
1	61. 50	61.3 7	61. 13	60 .6 9	60 .1 0	59 .5 0	60 .5 0	61. 00	61.00	61.0 0	61.50	61.50
2	61. 50	61.3 6	61. 12	60 .6 7	60 .0 8	59 .5 3	60 .5 3	61. 00	61.00	61.0 2	61.50	61.50
3	61. 50	61.3 5	61. 11	60 .6 5	60 .0 6	59 .5 7	60 .5 7	61. 00	61.00	61.0 3	61.50	61.50
4	61. 50	61.3 4	61. 10	60 .6 3	60 .0 5	59 .6 0	60 .6 0	61. 00	61.00	61.0 5	61.50	61.50
5	61. 50	61.3 4	61. 09	60 .6 1	60 .0 3	59 .6 3	60 .6 3	61. 00	61.00	61.0 6	61.50	61.50
6	61. 50	61.3	61. 09	60 .5 9	60 .0 1	59 .6 7	60 .6 7	61. 00	61.00	61.0 8	61.50	61.50
7	61. 50	61.3	61. 08	60 .5 7	59 .9 9	59 .7 0	60 .7 0	61. 00	61.00	61.1 0	61.50	61.50

D	Jan	Febr	Mo	Ap	M	Ju	Jul	Au	Septe	Oat	Nove	Dece
a	uar	uary	rch	ril	ay	ne	y	gus	mber			mber
У	у	uary	1011	111			J	t	moer	ooci	moer	moer
	61.	61.3	61.	60	59	59	60	61.		61.1		
8	50	1	07	.5	.9	.7	.7	00	61.00	1	61.50	61.50
				5	7	3	3					
9	61.	61.3	61.	60	59	59 .7	60 .7	61.	<i>c</i> 1 00	61.1	C1 50	C1 50
9	50	0	06	.5	.9 5	7	7	00	61.00	3	61.30	61.50
				60	59	59	60					
1	61.	61.2	61.	.5	.9	.8	.8	61.	61.00	61.1	61.50	61.50
0	50	9	05	1	3	0	0	00		5		
_	<i>c</i> 1	<i>c</i> 1.0	<i>c</i> 1	60	59	59	60	<i>c</i> 1		<i>c</i> 1 1		
1	61.	61.2	61.	.4	.9	.8	.8	61.	61.00	61.1	61.50	61.50
1	50	8	04	9	1	3	3	00		6		
1	61.	61.2	61.	60	59	59	60	61.		61.1		
2	50	8	03	.4	.8	.8	.8	00	61.00	8	61.50	61.50
		Ŭ	-	7	9	7	7					
1	61.	61.2	61.	60	59	59	60	61.		61.1		
3	50	7	03	.4	.8	.9	.9	00	61.00	9	61.50	61.50
				5	7 59	0 59	0					
1	61.	61.2	61.	.4	.8	.9	60 .9	61.	61.00	61.2	61.50	61.50
4	50	6	02	4	5	3	3	00	01.00	1	01.50	01.50
				60	59	59	60					
1	61.	61.2	61.	.4	.8	.9	.9	61.	61.00	61.2	61.50	61.50
5	50	5	01	2	3	7	7	00		3		
1	61.	61.2	61.	60	59	60	61	61.		61.2		
6	50	4	00	.4	.8	.0	.0	00	61.00	61.2 4	61.50	61.50
	30	7	00	0	1	0	0	00		7		
1	61.	61.2	60.	60	59	60	61	61.		61.2		
7	50	3	98	.3	.7	.0	0.	00	61.00	6	61.50	61.50
				8	9	3	0					
1	61.	61.2	60.	60	59 7	60	61	61.	61.00	61.2	61.50	61.50
8	49	2	96	.3	.7 7	.0 7	0.0	00	61.00	7	01.30	61.50
				60	, 59	60	61					
1	61.	61.2	60.	.3	.7	.1	.0	61.	61.00	61.2	61.50	61.50
9	48	2	94	4	5	0	0	00		9		
_	<i>C</i> 1	(1.2	<i>c</i> 0	60	59	60	61	<i>C</i> 1		(1.2		
2	61.	61.2	60.	.3	.7	.1	.0	61.	61.00	61.3	61.50	61.50
0	47	1	92	2	3	3	0	00		1		

D	Jan	Febr	Ma	Ap	M	Ju	Jul	Au	Septe	Oct	Nove	Dece
a	uar	uary	rch	ril	ay	ne	у	gus	mber		mber	mber
У	У				· .			t				
2	61.	61.2	60.	60	59	60	61	61.	<i>c</i> 1 00	61.3	c1 50	c1 50
1	47	0	90	.3	.7 1	.1 7	0. 0	00	61.00	2	61.50	61.50
				0	1 59							
2	61.	61.1	60.	.2	.6	.2	.0	61.	61.00	61.3	61 <b>5</b> 0	61.50
2	46	9	88	8	9	0	0.0	00	01.00	4	01.50	01.50
				60	59	60	61					
2	61.	61.1	60.	.2	.6	.2	.0	61.	61.00	61.3	61.50	61.50
3	45	8	86	6	8	3	0	00	01.00	5	01.00	01.00
				60	59	60	61					
2	61.	61.1	60.	.2	.6	.2	.0	61.	61.00	61.3	61.50	61.50
4	44	7	84	4	6	7	0	00		7		
2	<i>C</i> 1	<i>C</i> 1 1	<i>c</i> 0	60	59	60	61	<i>C</i> 1		(1.2		
2 5	61. 43	61.1	60. 82	.2	.6	.3	.0	61. 00	61.00	61.3	61.50	61.50
3	43	0	02	2	4	0	0	00		9		
2	61.	61.1	60.	60	59	60	61	61.		61.4		
6	42	6	81	.2	.6	.3	.0	00	61.00	0	61.50	61.50
	12		01	0	2	3	0	00		Ů		
2	61.	61.1	60.	60	59	60	61	61.		61.4		
7	41	5	79	.1	.6	.3	.0	00	61.00	2	61.50	61.50
				8	0	7	0					
2	61.	61.1	60.	60	59	60	61	61.	<b>54.00</b>	61.4	<i></i>	-1 <b>-</b> 0
8	41	4	77	.1	.5	.4	0.	00	61.00	4	61.50	61.50
				6	8	0	0					
2	61.		60.	60	59 .5	60	.0	61.	61.00	61.4	61 <b>5</b> 0	61.50
9	40		75	.1	6	3	0.0	00	01.00	5	01.50	01.50
				60	59	60	61					
3	61.		60.	.1	.5	.4	.0	61.	61.00	61.4	61 50	61.50
0	39		73	2	4	7	0	00	31.00	7	31.00	31.00
				_	59		61					
3	61.		60.		.5		.0	61.		61.4		61.50
1	38		71		2		0	00		8		
		l	l	<u> </u>	<u> </u>	l	<u> </u>		l	l		L

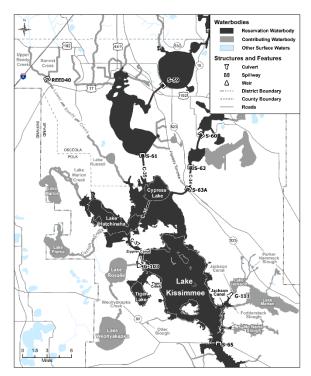


Figure 4-8A. Headwaters Revitalization Lakes reservation and contributing waterbodies. Unlabeled waterbodies in this figure are not included in this reservation/contributing waterbody group.

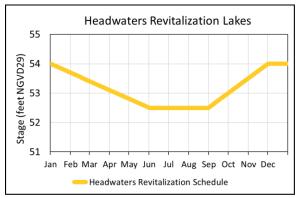


Figure 4-8B. Hydrograph of the authorized Headwaters Revitalization Schedule (HRS) at S-65 (derived from data in Table 4-8) for the Headwaters Revitalization Lakes reservation waterbodies.

Table 4-8. Stages for the Headwaters Revitalization Lakes reservation waterbodies (yellow line in Figure 4-8B).

	_											
D	Jan	Febr	Ma	Ap	M	Ju	Jul	Au	Septe	Oct	Nove	Dece
a	uar	uary	rch	ril	ay	ne	у	gus	mber	ober	mber	mber
У	У				Ů			t				
	54.	53.6	53.	53	52	52	52	52.		53.0		
1	00	9	41	.1	.8	.5	.5	50	52.52	1	53.51	54.00
				0	1	0	0			-		
	53.	53.6	53.	53	52	52	52	52.		53.0		
2	99	8	40	.0	.8	.5	.5	50	52.53	2	53.53	54.00
	"		40	9	0	0	0	30		_		
	53.	53.6	53.	53	52	52	52	52.		53.0		
3	98	7	39	.0	.7	.5	.5	50	52.55	33.0	53.54	54.00
	90	/	39	8	9	0	0	30		4		
	52	52.6	52	53	52	52	52	50		52 A		
4	53.	53.6	53.	.0	.7	.5	.5	52.	52.57	53.0	53.56	54.00
	97	6	38	7	8	0	0	50		5		
		<b>7</b> 0 c		53	52	52	52			<b>72</b> 0		
5	53.	53.6	53.	.0	.7	.5	.5	52.	52.58	53.0	53.58	54.00
	96	5	37	6	7	0	0	50		7		
				53	52	52	52					
6	53.	53.6		.0	.7	.5	.5	52.	52.60	53.0	53.59	54.00
	95	4	36	5	6	0	0	50		9		
				53	52	52	52					
7	53.	53.6	53.	.0	.7	.5	.5	52.	52.61	53.1	53.61	54.00
ľ	94	3	35	4	5	0	0	50	2.01	0	00.01	
				53	52	52	52					
8	53.	53.6	53.	.0	.7	.5	.5	52.	52.63	53.1	53 62	54.00
	93	3	34	3	4	0	0	50	32.03	2	33.02	34.00
				53	52	52	52					
9	53.	53.6	53.		.7	.5	.5	52.	52.65	53.1	52 61	54.00
9	92	2	33	0.0				50	32.03	4	33.04	34.00
				2	3	0	0					
1	53.	53.6	53.	53	52	52	52	52.	<b>50</b> 66	53.1	50.66	<b>5400</b>
0	91	1	32	.0	.7	.5	.5	50	52.66	5	53.66	54.00
				1	2	0	0					
1	53.	53.6	53.	53	52	52	52	52.		53.1		
1	90	0	31	.0	.7	.5	.5	50	52.68	7	53.67	54.00
				0	1	0	0					
1	53.	53.5	53.	52	52	52	52	52.		53.1		
2	89	9	30	.9	.7	.5	.5	50	52.70	8	53.69	54.00
Ĺ				9	0	0	0					
1	53.	53.5	53.	52	52	52	52	52.		53.2		
3	88	8	29	.9	.6	.5	.5	50	52.71	0	53.71	54.00
	00	0	23	8	9	0	0	50				
	_		_	_	_	_		_	_	_		_

D	Jan	Febr	Ma	Ap	M	Ju	Jul	Au	Septe	Oct	Nove	Dece
a	uar	uary	rch	ril	ay	ne	y	gus	mber	ober		mber
У	у	uu j	1011		•			t	1110 01	0001	111001	111001
1	53.	53.5	53.	52	52	52	52	52.		53.2		<b>7</b> 4 00
4	87	7	28	.9 7	.6 8	.5	.5	50	52.73	2	53.72	54.00
				52	52	52	52					
1	53.	53.5	53.	.9	.6	.5	.5	52.	52.74	53.2	53.74	54.00
5	86	6	27	6	7	0	0	50		3		
1	53.	53.5	53.	52	52	52	52	52.		53.2		
6	85	5	26	.9	.6	.5	.5	50	52.76	5	53.76	54.00
				5	6	0	0					
1	53.	53.5	53.	52 .9	.6	52 .5	52 .5	52.	52.78	53.2	53.77	54.00
7	84	4	25	.9	.6	0	0	50	32.76	7	33.77	34.00
				52	52	52	52					
1	53.	53.5	53.	.9	.6	.5	.5	52.	52.79	53.2	53.79	54.00
8	83	3	24	3	4	0	0	50		8		
1	53.	53.5	53.	52	52	52	52	52.		53.3		
9	82	2	23	.9	.6	.5	.5	50	52.81	0	53.80	54.00
				2	3	0	0					
2	53.	53.5	53.	52	52	52 .5	52 .5	52.	52.83	53.3	53.82	54.00
0	81	1	22	.9 1	.6 2	0	0	50	32.83	2	33.82	34.00
				52	52	52	52					
2	53.	53.5	53.	.9	.6	.5	.5	52.	52.84	53.3	53.84	54.00
1	80	0	21	0	1	0	0	50		3		
2	53.	53.4	53.	52	52	52	52	52.		53.3		
2	79	9	20	.8	.6	.5	.5	50	52.86	5	53.85	54.00
				9	0	0	0					
2	53.	53.4	53.	52	52	52	52	52.	<b>52</b> 00	53.3	£2 07	<b>5</b> 4.00
3	78	8	19	.8	.5 9	.5	.5	50	52.88	6	53.87	54.00
				52	52	52	52					
2	53.	53.4	53.	.8	.5	.5	.5	52.	52.89	53.3	53.89	54.00
4	77	7	18	8	8	0	0	50		8		
2	53.	53.4	53.	52	52	52	52	52.		53.4		
5	<i>5</i> 5.	6	33. 17	.8	.5	.5	.5	52. 50	52.91	0	53.90	54.00
Ĺ	. 0		- ′	7	7	0	0					
2	53.	53.4	53.	52	52	52	52	52.	50.00	53.4	<i>52.02</i>	54.00
6	75	5	16	.8	.5	.5	.5	50	52.92	1	53.92	54.00
<u></u>				6	6	0	0					

D a y	Jan uar y	Febr		-	M ay		Jul y	Au gus t	•		Nove mber	
2 7	53. 74	53.4 4	53. 15	52 .8 5	52 .5 5	52 .5 0	52 .5 0	52. 50	52.94	53.4 3	53.93	54.00
2 8	53. 73	53.4 3	53. 14	52 .8 4	52 .5 4	52 .5 0	52 .5 0	52. 50	52.96	53.4 5	53.95	54.00
2 9	53. 72	53.4	53. 13	52 .8 3	52 .5 3	52 .5 0	52 .5 0	52. 50	52.97	53.4 6	53.97	54.00
3	53. 71		53. 12	52 .8 2	52 .5 2	52 .5 0	52 .5 0	52. 50	52.99	53.4 8	53.98	54.00
3	53. 70		53. 11		52 .5 1		52 .5 0	52. 50		53.4 9		54.00

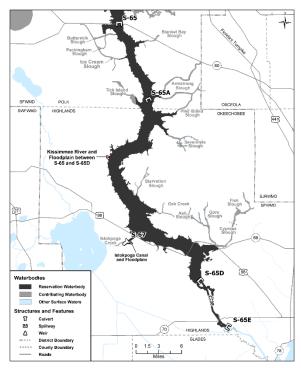


Figure 4-9. Kissimmee River reservation and contributing waterbodies. Unlabeled waterbodies in this figure are not included in this reservation/contributing waterbody group.

NAME OF PERSON ORIGINATING PROPOSED RULE: Lawrence Glenn, Division Director, Water Resources

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: South Florida Water Management District Governing Board

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: November 12, 2020

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: July 16, 2014

#### DEPARTMENT OF CHILDREN AND FAMILIES

## **Agency for Persons with Disabilities**

RULE NOS.: RULE TITLES:

65G-4.0213 Definitions

65G-4.0214 Allocation Algorithm 65G-4.0215 General Provisions

65G-4.0216 Establishment of the iBudget Amount

65G-4.0217 iBudget Cost Plan

65G-4.0218 Significant Additional Need Funding

PURPOSE AND EFFECT: The purpose and effect of these rule amendments is to implement iBudget Florida as required by section 393.0662, Florida Statutes ("F.S.").

SUMMARY: These rule amendments will enable the Agency for Persons with Disabilities ("Agency") to comply with statutory changes to sections 393.063 and 393.0662, F.S., as adopted by the Florida Legislature in chapter 2020-71, Laws of Florida. Chapter 2020-71 revised some of the requirements for the Agency to establish the iBudget Florida system for the delivery of Medicaid Home and Community Based Services Waiver services to clients with developmental disabilities. Specifically, chapter 2020-71 revised the criteria used by the Agency to authorize additional funding for clients with significant additional needs and requires the Agency to certify and document the use of other available services before approving the expenditure of certain funds. These rule amendments clarify the documentation required for each service requested in a client's cost plan and a significant additional needs request. These rule amendments also improve the wording of the rules generally so that its application is unambiguous and consistent.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein:

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: 393.0662, F.S.

LAW IMPLEMENTED: 393.0662, 409.906, F.S.

A HEARING WILL BE HELD AT THE DATE, TIME AND PLACE SHOWN BELOW:

DATE AND TIME: December 7, 2020, 11:00 a.m. EST

PLACE: Attendees may register for the hearing at: https://register.gotowebinar.com/register/78965071041609807 52. After registering, a confirmation email will be received containing information about joining the webinar, and opportunities to offer comments and questions will be available. 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 48 hours before the workshop/meeting by contacting: Danielle Thompson at (850)922-6823.. 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: Danielle Thompson, Senior Attorney, Agency for Persons with Disabilities, 4030 Esplanade Way, Suite 335, Tallahassee, FL 32399, (850)922-6823, Danielle.Thompson@apdcares.org.

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

65G-4.0213 Definitions.

For the purposes of this chapter, the term:

(1) "Agency" means the Agency for Persons with Disabilities.

(2)(1) "Allocation Algorithm": The means the mathematical formula based upon statistically validated relationships between <u>client</u> individual characteristics (variables) and the <u>client's</u> individual's level of need for services provided through the Waiver as set forth in <u>R</u>rule 65G-4.0214, F.A.C., and as provided in section 393.0662(1)(a), F.S.

(3)(2) "Allocation Algorithm Amount": The means the result of the Allocation Algorithm apportioned according to available funding.

(4)(3) "Amount Implementation Meeting Worksheet" or "AIM Worksheet" means a (AIM): A form used by the Agency for new Wwaiver enrollees, and upon recalculation of a client's an individual's algorithm, to:

- (a) <u>Ceommunicate a client's</u> an individual's Allocation Algorithm Amount;
- (b) <u>I</u>identify proposed services based upon the Allocation Algorithm Amount; and

- (c) <u>I</u>identify additional services, if any, should the <u>client</u> individual or their <u>legal</u> representative feel that any Significant Additional Needs of the <u>client</u> individual cannot be met within the Allocation Algorithm Amount. The <u>AIM Amount Implementation Meeting (AIM)</u> Worksheet APD <u>Form 65G-4.0213 A 2015 01</u>, effective <u>12 3 2014</u>, is hereby adopted and incorporated by reference, in the rule, and is available at <a href="http://www.flrules.org/Gateway/reference.asp?No=Ref 07071">http://www.flrules.org/Gateway/reference.asp?No=Ref 07071</a>.
- (5)(4) "Approved Cost Plan": The means the document that lists all Wwaiver services that have been authorized by the Aagency for the client individual, including the anticipated cost of each approved Wwaiver service, the provider of the approved service, and information regarding the provision of the approved service.
- (6) "Available Service" means a support that is covered, authorized, or provided by a government program not operated by the agency, a community program, a third party such as a private health insurance company, or provided by a natural support.
- (7) "Verification of Available Services" means a form completed by the WSC to enable the Agency to certify and document that the client has utilized all available services through the Medicaid State Plan, school-based services, private insurance, other benefits, and any other resources, such as local, state, and federal government and non-government programs or services and natural or community supports, that might be available prior to requesting Waiver funds. The Verification of Available Services documents and verifies that the iBudget Waiver is the payer of last resort. A valid and accurate Verification of Available Services is a condition precedent to the authorization of services. The Verification of Available Services APD Form 65G-4.0213 B, effective , is hereby adopted and incorporated by reference and is available at
- (8) "Client" has the same meaning as provided in section 393.063(7), F.S.
- (9)(5) "Client Advocate": has the same meaning as provided in section 393.063(8)(6), F.S, and includes legal counsel if designated by the <u>client</u> individual or the <u>client</u>'s <u>legal</u> individual's representative.
- (6) Extraordinary Need: Has the same meaning as provided in section 393.0662(1)(b), F.S.
- (10) "Client Review" means the Agency's review of information submitted by a WSC to determine if the request meets significant additional needs criteria.
- (11) "Community Supports" means resources or services accessible to a client as a member of the community. This includes, but not limited to, resources available through organizations such as faith-based, cultural, geographic, non-profit, for-profit, and community groups.

- (12)(7) "Handbook": Mmeans is the Florida Medicaid Developmental Disabilities Waiver Services Coverage and Limitations Handbook, which is hereby incorporated by reference, and is available at: http://www.flrules.org/Gateway/reference.asp?No=Ref 07072, as adopted by Rfule 59G-13.070, F.A.C. (effective October 2020 9 3 2015).
- (13)(8) "Health and Safety": iIncludes both mental and physical health and safety.
- (14) "iBudget" means the Home and Community-Based Services Medicaid Waiver program under section 409.906, F.S., that consists of the Waiver service delivery system utilizing individual budgets required pursuant to section 393.0662, F.S., and under which the Agency for Persons with Disabilities operates the Home and Community-Based Services Waiver.
- (15)(9) "iBudget Amount": means the total amount of funds that have been approved by the Aagency, pursuant to the iBudget Rules, for a client an individual to spend expend for Wwaiver services during a fiscal year.
- (10) iBudget: The home and community based services Medicaid waiver program under section 409.906, F.S., that consists of the waiver service delivery system utilizing individual budgets required pursuant to section 393.0662, F.S., and under which the Agency for Persons with Disabilities operates the Developmental Disabilities Individual Budgeting Waiver.
- (16)(11) "iBudget Rules": means Rrules 65G-4.0213 through 65G-4.0218, F.A.C., and are the rules which implement and interpret iBudget Amounts.
- (12) Individual: a person with a developmental disability, as defined by section 393.063, F.S., and who is enrolled in iBudget.
- (13) Individual representative: The individual's parent (for a minor), guardian, guardian advocate, a designated person holding a power of attorney for decisions regarding health care or public benefits, designated attorney or a healthcare surrogate, or in the absence of any of the above, a medical proxy as determined under section 765.401, F.S. The individual's Waiver Support Coordinator shall ascertain whether an individual has any of these representatives and inform the agency of the identity and contact information.
- (14) Individual Review Agency review of information submitted by a WSC, to determine if the request meets significant additional needs criteria.
  - (17) "Legal Representative" means:
- (a) For clients under the age of 18 years, the legal representative or health care surrogate appointed by the Florida court to represent the child or anyone designated by the

parent(s) of the child to act on the parent(s)' behalf (e.g., due to military absence).

(b) For clients age 18 years or older, the legal representative could be the client, anyone designated by the client through a Power of Attorney or Durable Power of Attorney, a medical proxy under chapter 765, F.S., or anyone appointed by a Florida court as a guardian or guardian advocate under chapter 393 or 744, F.S.

(18)(15)(a) "Medically necessary" or "medical necessity," as defined in the Handbook, means that the medical or allied care, goods, or services furnished or ordered must meet the following conditions:

- 1. Be necessary to protect life, to prevent significant illness or significant disability, or to alleviate severe pain,
- 2. Be individualized, specific, and consistent with symptoms or confirmed diagnosis of the illness or injury under treatment, and not in excess of the patient's needs,
- 3. Be consistent with generally accepted professional medical standards as determined by the Medicaid program, and not experimental or investigational,
- 4. Be reflective of the level of service that can be safely furnished, and for which no equally effective and more conservative or less costly treatment is available; statewide; and,
- 5. Be furnished in a manner not primarily intended for the convenience of the <u>recipient</u> individual, the <u>recipient</u>'s individual's caretaker, or the provider.
- (b) The fact that a provider has prescribed, recommended, or approved medical or allied care, goods, or services does not, in itself, make such care, goods or services medically necessary or a medical necessity or a covered service.

(19)(16) "Natural Support": means uUnpaid supports that are or may be provided voluntarily to the client individual in lieu of Waiver services and supports. Any determination of the availability of natural supports includes, but is not limited to consideration of the client's individual's caregiver(s) age, physical and mental health, travel and work or school schedule, responsibility for other dependents, sleep, and ancillary tasks necessary to the health and well-being of the client.

(20)(17) "Person-centered planning"- means a planning approach directed by a client an individual with long term care needs, intended to identify the strengths, capacities, preferences, needs, and desired outcomes of the client individual. The client individual or legal representative family determines the other participants in this process for the purposes of assisting the client individual to identify and access a personalized mix of paid and non-paid services and supports that will assist him/her to achieve personally-defined outcomes in the most inclusive community setting and to facilitate health, safety, and well-being.

(21) "Qualified Organization" means an organization which employs support coordinators who serve clients that receive Agency services and is determined by the Agency to have met all of the requirements of section 393.0663(2), F.S., the Developmental Disabilities Individual Budgeting Waiver Services Coverage and Limitations Handbook, and chapter 65G-14, Florida Administrative Code.

<u>(22)(18)</u> "Questionnaire for Situational Information" (QSI) or "QSI" effective 2 15 08: An means an assessment instrument used by the Agency to determine a client's an individual's needs in the areas of functional, behavioral, and physical status. The QSI is adopted by the Agency as the current valid and reliable assessment instrument and is hereby incorporated by reference. The QSI is available at: http://www.flrules.org/Gateway/reference.asp?No=Ref-07075.

(23)<del>(19)</del> "QSI Assessor"- means an Agency employee who has been certified by the Agency in the administration of the OSI

(24)(20) "Service Authorization" - means aAn Agency notification that authorizes the provision of specific <u>W</u>waiver services to <u>a client</u> an individual and includes, at a minimum, the provider's name and the specific amount, duration, scope, frequency, and intensity of the approved service.

(25)(21) "Service Families": means exight categories that group services related to: Life Skills Development, Supplies and Equipment, Personal Supports, Residential Services, Support Coordination, Therapeutic Supports and Wellness, Transportation and Dental Services. The Service Families include the following services:

- (a) Life Skills Development, which includes:
- 1. Life Skills Development Level 1 (companion services),
- 2. Life Skills Development Level 2 (supported employment); and,
  - 3. Life Skills Development Level 3 (adult day training).
  - (b) Supplies and Equipment which includes:
  - 1. Consumable Medical Supplies,
  - 2. Durable Medical Equipment and Supplies,
  - 3. Environmental Accessibility Adaptations; and,
- 4. Personal Emergency Response Systems (unit and services).
  - (c) Personal Supports, which includes:
- 1. Services formerly known as in-home supports, respite, personal care and companion for <u>clients</u> <u>individuals</u> age 21 or older, living in their own home or family home and also for those at least 18 but under 21 living in their own home; and,
- 2. Respite Care (for <u>clients</u> individuals under 21 living in their family home).
  - (d) Residential Services, which includes:
  - 1. Standard Residential Habilitation,
  - 2. Behavior-Focused Residential Habilitation,
  - 3. Intensive-Behavior Residential Habilitation,

- 4. Enhanced Intensive Behavior Residential Habilitation
- 5. Medical Enhanced Intensive Behavior Residential Habilitation
  - 6.4. Live-In Residential Habilitation,
  - 7.5. Special Specialized Medical Home Care; and,
  - 8.6. Supported Living Coaching.
  - (e) Waiver Support Coordination.
  - (f) Therapeutic Supports and Wellness, which includes:
  - 1. Private Duty Nursing,
  - 2. Residential Nursing,
  - 3. Skilled Nursing,
  - 4. Dietician Services.
  - 5. Respiratory Therapy,
  - 6. Speech Therapy,
  - 7. Occupational Therapy,
  - 8. Physical Therapy,
  - 9. Specialized Mental Health Counseling,
  - 10. Behavior Analysis Services; and,
  - 11. Behavior Assistant Services.
  - (g) Transportation; and,
- (h) Dental Services, which consists of Adult Dental Services.

(26)(22) "Significant": Significant means of considerable magnitude or considerable effect.

(27)(23) "Significant Additional Needs" (SANs): or "SANs" Need for additional funding that if not means, as provided in section 393.063(39), F.S., an additional need for medically necessary services which would place the health and safety of the client individual, the client's individual's caregiver, or the public in serious jeopardy which are authorized under section 393.0662(1)(b), F.S., and categorized as extraordinary need, significant need for one time or temporary support or services, or significant increase in the need for services after the beginning of the service plan year. In addition, the if it is not met. The term also includes a significant need for services to meet an additional need that the client requires in order to remain in the least restrictive setting, including, but not limited to, employment services and transportation services as provided in paragraph 65G-4.2018(1)(d), F.A.C.. The Agency may provide additional funding only after the determination of a client's initial allocation amount and after the WSC has documented the availability of non-Waiver resources on the Verification of Available Services form. Examples of SANs that may require long-term support include, but are not limited to, any of the

(a)a. A documented history of significant, potentially life-threatening behaviors, such as recent attempts at suicide, arson, nonconsensual sexual behavior, self-injurious behavior requiring medical attention, dementia, or age-related behaviors that present significant health and safety risks.

- (b)b. A complex medical condition that requires active intervention by a licensed nurse on an ongoing basis that cannot be taught or delegated to a non-licensed person,
- e. A chronic comorbid condition. As used in this subparagraph, the term "comorbid condition" means a diagnosed medical or mental health condition existing simultaneously but independently with another medical or mental health condition in a patient,
- (c)d. A need for total physical assistance with activities of daily living such as eating, bathing, toileting, grooming, dressing, personal hygiene, lifting, transferring or ambulation;
- (d)e. Permanent or long-term loss or incapacity of a caregiver:
- (e)f. Loss of services authorized under the state Medicaid plan or through the school system due to a change in age;
- (f)g. Significant decline ehange in medical, behavioral or functional status;
- (g)h. Lack of a meaningful day activity needed to foster mental health, prevent regression or engage in meaningful community life and activities;
- (h)i. One or more of the situations described in Rrule 65G-1.047, F.A.C., Crisis Status Criteria; and
- (i)<del>i.</del> Risk of abuse, neglect, exploitation, or abandonment that can be mitigated with Waiver services.
- (28) "Significant change in condition or circumstance" means a change in a client's health status after an accident or illness, an actual or anticipated change in the client's living situation, a change in the caregiver relationship or the caregiver's ability to provide supports, loss of or deterioration of his or her home environment, or loss of the client's spouse or caregiver. Examples of a significant change include:
- (a) A deterioration in health status that requires that the client receive services at a greater intensity or in a different setting to ensure that client's health or safety;
- (b) Onset of a health, environmental, behavioral, or medical condition that requires that the client receive services at a greater intensity or in a different setting to ensure the client's health or safety; or
- (c) A change in age or living setting resulting in a loss of services funded or otherwise provided from sources other than the Waiver. This may include a change in living setting which requires a different service array or a change in the availability or health status of a primary caregiver that prevents that caregiver from continuing to provide support.
- (29)(24) "Support plan": means aAn individualized and person-centered plan of supports and services designed to meet the needs of a client an individual enrolled in the iBudget. The plan is based on the preferences, interests, talents, attributes and needs of a client an individual, including the availability of natural supports.

(30)(25) "Temporary basis": means  $\underline{aA}$  time period of less than 12 months.

(31)(26) "Waiver": means the Developmental Disabilities Individual Budgeting Medicaid Home and Community Based Services Waiver (iBudget) operated by the Agency.

(32)(27) "Waiver Support Coordinator" (WSC) or "WSC": mMeans an employee a person of a qualified organization as defined in section 393.0663, F.S., who is selected by the client individual or the client's legal representative to assist the client individual and family in identifying their capacities, needs, and resources; finding and gaining access to necessary supports and services; coordinating the delivery of supports and services; advocating on behalf of the client individual and family; maintaining relevant records; and monitoring and evaluating the delivery of supports and services to determine the extent to which they meet the needs and expectations identified by the client individual, family, and others who participated in the development of the support plan with person-centered planning.

(34) This Rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

Rulemaking Authority 393.501(1), 393.0662 FS. Law Implemented 393.063, 393.0662, 409.906 FS. History–New 7-7-16, Amended

65G-4.0214 Allocation Algorithm.

(1) To establish the Allocation Algorithm Amount for any <u>client</u> individual who has not previously had a QSI assessment, a QSI assessment must be completed prior to calculating the Allocation Algorithm Amount under subsection (2).

(a) The QSI assessor shall arrange for a face to face meeting with the <u>client</u> <u>individual</u> <u>and, if available, or</u> the <u>client's legal</u> <u>individual's</u> representative. The WSC shall attend the face to face meeting with consent of the <u>client</u> <u>individual</u> or the <u>client's legal</u> <u>individual's</u> representative. If the <u>client</u> <u>individual</u> or the <u>client's legal</u> <u>individual's</u> representative is not capable of fully responding to all of the assessment questions, at least one participant with day-to-day knowledge of the <u>client's</u> <u>individual's</u> care should participate.

(b) A copy of the completed QSI evaluation and scores shall be provided to the client individual and WSC.

- (c) Upon receiving QSI results if the <u>client</u> individual or <u>his</u> or her their legal representative identifies an error in the QSI results the WSC shall notify the Agency in writing setting forth the details of the error. At any time, the <u>client</u> individual or WSC can prepare a statement to be maintained in <u>client's</u> individual's Central File identifying any concerns with the QSI assessment score or responses. If any error is identified in the QSI assessment the <u>Aagency</u> shall review the error to determine if any adjustments are needed. The <u>Aagency</u> shall inform the WSC of the result of the review and provide a revised Allocation Algorithm Amount, if appropriate, within 15 working days of notification of the error. The WSC shall in turn notify the <u>client</u> individual or the <u>client's</u> individual's representative.
- (d) The <u>client</u> <u>individual</u> or WSC may request a reassessment any time there has been a significant change in circumstance or condition that would impact any of the questions used as variables in the algorithm determination. The Agency shall arrange for a reassessment at the earliest possible time in accordance with the circumstances, complete the reassessment, and notify the <u>client</u> <u>individual</u> and WSC of the results within 60 days of the request for reassessment. This section shall not be construed to require the Agency to wait for the completion of a QSI in order to address an emergency situation of the client <u>individual</u>.
- (2) To calculate the Allocation Algorithm for each <u>client</u> <u>individual</u>, the following weighted values, as applicable, shall be summed, and the resulting total then squared:
  - (a) The base value for all clients individuals, 27.5720;
  - (b) If the <u>client</u> individual is age 21 to 30, 47.8473;
  - (c) If the <u>client</u> individual is age 31 or older, 48.9634;
- (d) If the <u>client</u> <u>individual</u> resides in supported or independent living, or the <u>client</u> <u>individual</u> resides in a licensed facility and does not receive residential habilitation services, 35.8220;
- (e) If the <u>client</u> <u>individual</u> resides in a licensed residential facility that is designated to provide Standard or Live-In residential habilitation services, 90.6294;
- (f) If the <u>client</u> individual resides in a licensed residential facility with a Behavior Focus designation, 131.7576;
- (g) If the <u>client</u> individual resides in a licensed residential facility with an Intensive Behavior designation, 209.4558;
- (h) If the <u>client</u> <u>individual</u> resides in a licensed residential facility that is a Comprehensive Transitional Education Program or provides Special Medical Home Care, 267.0995;
- (i) The sum of the scores on the <u>client</u> individual questions in the QSI Behavioral Status Subscale (Questions 25-30), multiplied by 0.4954;
- (j) If the <u>client</u> individual resides in the family home, the sum of the scores on the client individual questions in the QSI

Functional Status Subscale (Questions 14-24), multiplied by 0.6349:

- (k) If the <u>client</u> <u>individual</u> resides in supported or independent living, the sum of the scores on the <u>client</u> <u>individual</u> questions in the QSI Functional Status Subscale (Questions 14-24), multiplied by 2.0529;
- (l) If the <u>client</u> <u>individual</u> resides in supported or independent living, the sum of the scores on the <u>client</u> <u>individual</u> questions in the QSI Behavioral Status Subscale (Questions 25-30), multiplied by 1.4501;
- (m) The <u>client's individual's</u> score on QSI Question 16, multiplied by 2.4984;
- (n) The <u>client's</u> <u>individual's</u> score on QSI Question 18, multiplied by 5.8537;
- (o) The <u>client's</u> <u>individual's</u> score on QSI Question 20, multiplied by 2.6772;
- (p) The <u>client's</u> <u>individual's</u> score on QSI Question 21, multiplied by 2.7878;
- (q) The <u>client's</u> <u>individual's</u> score on QSI Question 23, multiplied by 6.3555;
- (r) The <u>client's</u> individual's score on QSI Question 28, multiplied by 2.2803;
- (s) The <u>client's</u> <u>individual's</u> score on QSI Question 33, multiplied by 1.2233;
- (t) The <u>client's individual's</u> score on QSI Question 34, multiplied by 2.1764;
- (u) The <u>client's</u> <u>individual's</u> score on QSI Question 36, multiplied by 2.6734; and
- (v) The <u>client's</u> individual's score on QSI Question 43, multiplied by 1.9304.
- (3) The squared result of the sum of the applicable values of paragraphs (2)(a) through (v), above, then apportioned according to available funding, is the <u>client's</u> individual's Allocation Algorithm Amount.
- (4) This Rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

Rulemaking Authority 393.501(1), 393.0662 FS. Law Implemented 393.063, 393.0662 FS. History–New 7-7-16, Amended \_\_\_\_\_.

#### 65G-4.0215 General Provisions.

- (1) Medical necessity alone is not sufficient to authorize a service under the Wwaiver; in addition:
- (a) With the assistance of the WSC<sub>2</sub> the <u>client individual</u> must utilize all available State Plan Medicaid services, school-based services, private insurance, natural supports, and any other resources <u>that which</u> may be available to the <u>client individual</u> before expending funds from the <u>client's individual's</u> iBudget Amount for support or services. As an example, State Plan Medicaid services for children under the age of 21

typically include, personal care assistance, therapies, consumable medical supplies, medical services, and nursing;

- (b) The services must be within  $\underline{W}_{\overline{W}}$  aiver coverages and limitations; and,
- (c) The cost of the services must be within the Allocation Algorithm Amount unless there is a significant additional need demonstrated.

Failure to meet the above criteria shall result in a denial of a request for additional funding.

- (2) WSCs shall coordinate with the <u>clients</u> <u>individuals</u> they serve to ensure that services are selected from all available resources to keep the annual cost of services within the <u>client's</u> <u>individual's</u> iBudget Amount while maintaining the <u>client's</u> <u>individual's</u> health and safety.
- (3) Prior to authorizing new or increased services or at the time of a medical necessity review, the Agency must certify and document within the client's cost plan that the client has used all available services authorized under the Medicaid State Plan; school-based services; private insurance; local, state, and federal government and non-government programs or services; natural or community supports; and any other benefit or resource that may be available to the client before using funds from the iBudget to pay for supports and services.
  - (a) The iBudget Waiver is the payor of last resort.
- (b) A valid and accurate Vertification of Available Services form is a condition precedent to the authorization of services. To enable the Agency to certify and document that the client has utilized all available services pursuant to section 393.0662(3), F.S., the WSC must complete and submit the Verification of Available Services to the Agency:
- 1. At the time of any requests to add or increase services, or
- 2. Upon request from the Agency when it is making determinations of medical necessity for Waiver services.

(4)(3) Cost Plan Flexibility.

- (a) After the <u>client's</u> <u>individual's</u> proposed cost plan is approved, he or she may change the services in his or her Approved Cost Plan provided that such change does not jeopardize the health and safety of the <u>client</u> <u>individual</u> and meets medical necessity.
- (b) When changing the services within the Approved Cost Plan, the <u>client individual</u> and his or her WSC shall ensure that sufficient funding remains allocated for unpaid services that were authorized and rendered prior to the effective date of the change.
- (c) <u>Clients</u> <u>Individuals</u> enrolled in iBudget will have flexibility and choice to budget or adjust funding among the following services without requiring additional authorizations from the Agency, provided the <u>client's</u> <u>individual's</u> overall iBudget Amount is not exceeded and all health and safety needs are met:

- 1. Life Skills Development 1,
- 2. Life Skills Development 2,
- 3. Life Skills Development 3, within the approved ratio,
- 4. Durable Medical Equipment,
- 5. Adult Dental,
- 6. Personal Emergency Response Systems,
- 7. Environmental accessibility adaptations,
- 8. Consumable Medical Supplies,
- 9 Transportation,
- 10. Personal Supports up to \$16,000,
- 11. Respite up to \$10,000.
- (d) Medically necessary services will be authorized by the Agency for covered services not listed above if the cost of such services are within the client's individual's iBudget Amount and in accordance with subsection 65G-4.0215(1), F.A.C. The Agency shall authorize services in accordance with criteria identified in section 393.0662(1)(b), F.S., medical necessity requirements of section 409.906, F.S., subsection 59G-1.010(166), F.A.C., Handbook limitations, and the authority under Title Rule 42 of the Code of Federal Regulations, CFR Part 440.-Section 230(d).
- (d) Retroactive application of changes to service authorizations is prohibited without written approval from the agency. In limited circumstances, an exception may be made for a retroactive service authorization by the Agency regional office to correct an administrative error or to consider a health and safety risk and emergency situations.
- (f)(e) Service authorization and any modifications to it must be received by the provider prior to service delivery. This includes changes to the authorization as a result of <u>clients</u> individuals redistributing funds within their existing cost plan.
- (5)(4) Consumer Directed Care Plus (CDC+): <u>clients</u> Individuals enrolled in the CDC+ program are subject to iBudget <u>R</u>rule 65G-4.0214, subsections 65G-4.0215(1), (2) and (7)(6), and <u>R</u>rules 65G-4.0216, 65G-4.0217, 65G-4.0218, F.A.C.

## (6)(5) Approval, Denial, or Closure of Applications.

- (a) iBudget Waiver providers must have applied through the Agency for Persons with Disabilities to ensure that they meet the minimum qualifications to provide iBudget Waiver services. iBudget Waiver providers must also be enrolled as a Medicaid provider through the Agency for Health Care Administration. However, providers do not have to provide Medicaid State Plan services in order to provide <u>W</u>waiver services.
- (b) To enroll as a provider for iBudget Waiver services, the provider must first submit an application to the Agency or Persons with Disabilities using the Regional iBudget Provider Enrollment Application Waiver Support Coordinator (WSC) APD Form 65G-4.0215 A 2015 02, effective date 7 1 2015, for Wwaiver Support Ceoordinator

applications, which is available http://www.flrules.org/Gateway/reference.asp?No=Ref\_07073, or the Regional iBudget Provider Enrollment Application – Non-WSC – APD Form 65G-4.0215 B <del>2015-03</del>, effective date 7-1-2015, for all other provider applications, is which available http://www.flrules.org/Gateway/reference.asp?No=Ref 07074. These forms are hereby incorporated by reference. On the application providers must identify the counties where they intend to provide services. The qualifications to provide services are identified in the Handbook.

- (c) The Agency for Persons with Disabilities will review the application, request missing documentation, and issue a decision about whether the provider meets the qualifications to provide services. The Agency for Persons with Disabilities may close the application if missing information is not provided within 45 calendar days of the request by the Agency. The qualifications to provide services are identified in the Handbook. and approve or deny complete applications within 90 days of receipt; the Agency will close incomplete applications.
- 1. The Agency will only consider complete applications that include all required information and meet the requirements delineated in this chapter, the iBudget Handbook, and section 393.0663, F.S. An application is complete upon the Agency's receipt of all requested information and correction of any error or omission for which the applicant was notified.
- 2. If the Agency receives an incomplete application, the Agency will notify the applicant. The applicant will have 45 calendar days from the date of the notice to submit the documentation, information, or make any corrections designated in the notice. If the applicant does not complete the application within 45 days of the notice, the application must be closed by the Agency. After an application is closed, all documentation and information submitted will no longer be considered, and a new complete application must be submitted for consideration by the Agency. The closure of an application is not Agency action and will not be considered substantively by the Agency in any subsequent application.

(d)(b) If a Wwaiver provider wishes to, expand by providing additional services, expand services geographically, or expand from solo to agency, the provider must notify the Agency regional office by submitting a Provider Expansion Request form - APD Form 65G-4.0215 C 2015-04, effective date 8 20 2013, which is hereby incorporated by available reference and is http://www.flrules.org/Gateway/reference.asp?No=Ref 07076. The Agency regional office must approve any expansion prior to the provision of expanded services. The qualifications to provide or expand services are identified in the Handbook. Before the Agency regional office approves a provider for expansion, the Agency regional office must determine that the provider meets the provider qualifications and has:

- 1. An 85% or higher on their last Quality Assurance Organization (QIO) report. If a provider does not have a history of a QIO review, this does not prevent consideration for expansion,
- 2. No identified alerts (i.e., background screening, medication administration, and validation),
- 3. No unresolved billing discrepancies or plan of remediation,
- 4. No adverse performance history relating to the health and safety of individuals served; and.
- 5. No open investigations or referrals to the Agency for Health Care Administration (AHCA) and the Department of Children and Families (DCF).

Agency staff shall check with the provider's home regional office to determine whether there is a history of complaints filed and logged on the remediation tracker, any open investigations or referrals to AHCA's Medicaid Program Integrity (MPI) or the Attorney General's Medicaid Fraud Control Unit (MFCU), or DCF. The Agency shall make the determination required under this paragraph in not more than 90 days.

- (7)(6)(a) When a client an individual is enrolled in the iBudget, that client individual remains enrolled in the <u>W</u>waiver position allocated unless the <u>client</u> individual becomes disenrolled due to one of the following conditions:
- 1. The <u>client</u> individual or <u>client's legal</u> individual's representative chooses to terminate participation in the  $W_{\overline{w}}$  aiver.
  - 2. The <u>client</u> individual moves out-of-state.
- 3. The <u>client</u> <u>individual</u> loses eligibility for Medicaid benefits and this loss is expected to extend for a lengthy period.
  - 4. The client individual no longer needs Wwaiver services.
- 5. The <u>client</u> individual no longer meets level of care for admission to an ICF/IID.
- 6. The <u>client</u> individual no longer resides in a community-based setting but moves to a correctional facility, detention facility, defendant program, or nursing home or resides in a setting not otherwise permissible under Wwaiver requirements.
- 7. The <u>client</u> individual is no longer able to be maintained safely in the community.

If <u>a client</u> an individual is disenrolled from the <u>W</u>waiver and becomes eligible for reenrollment within 365 days that <u>client</u> individual can return to the <u>W</u>waiver and resume receiving <u>W</u>waiver services. If <u>W</u>waiver eligibility cannot be re-established or if the <u>client</u> individual who has chosen to disenroll has exceeded this time period, the <u>client</u> individual cannot return to the <u>W</u>waiver until a new <u>W</u>waiver vacancy occurs and funding is available. In this instance, the <u>client</u> individual is added to the <u>Waiting List</u> waitlist of <u>clients</u> individuals requesting <u>W</u>waiver participation. The new

effective date is the date eligibility is re-established or the <u>client</u> individual requests re-enrollment for <u>W</u>waiver participation.

- (b) Providers are responsible for notifying the <u>client's</u> individual's WSC and the Agency if the provider becomes aware that any of the conditions of paragraph (a) or (c), exists.
- (c) If <u>a client</u> an individual, family member, or <u>legal</u> individual representative refuses to cooperate with the provision of <u>W</u>waiver services in any of the following ways: develop a cost plan or support plan, participate in a required QSI assessment or other approved <u>A</u>agency needs assessment tool, or refuse to annually sign the <u>W</u>waiver eligibility worksheet that establishes a level of care, then the Agency will review the circumstances to determine if the <u>client</u> individual should be removed from the <u>W</u>waiver for failing to comply with specific eligibility requirements. Any such decision by the Agency shall provide written notice to the <u>client</u> individual, the <u>client</u>'s <u>legal</u> individual's representative and the WSC, at least 30 days before terminating services.
- (d) Clients Individuals denied services shall have the right to a fair hearing. Clients Individuals are exempted from this provision if they do not have the ability to give informed consent and do not have a legal guardian or individual representative. The Agency shall not remove a client an individual from the Wwaiver due to non-compliance if it directly impacts the client's individual's health, safety, and welfare.
- (8) This Rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

Rulemaking Authority <del>120.60(1),</del> 393.501(1), 393.0662 FS. Law Implemented <del>120.60(1),</del> <u>393.063,</u> 393.0662, 409.906 FS. History–New 7-7-16, Amended 9-12-18, \_\_\_\_\_.

65G-4.0216 Establishment of the iBudget Amount.

- (1) The iBudget Amount for <u>a client</u> an individual shall be the Allocation Algorithm Amount, as provided in <u>R</u>rule 65G-4.0214, F.A.C., plus any approved Significant Additional Needs funding as provided in <u>R</u>rule 65G-4.0218, F.A.C.
- (2) The Agency will determine the iBudget Amount consistent with the criteria and limitations contained in the following provisions: sections 409.906 and 393.0662, F.S.; and  $\underline{R}$ Fules 59G-13.080, 59G-13.081, and 59G-13.070, F.A.C.
  - (3) Significant Additional Needs Review: Each
- (a) The first time the an Allocation Algorithm Amount is calculated, the WSC will discuss the Allocation Algorithm Amount with the client individual, and, if available, or the client's legal individual's representative and, if available and applicable, the client advocate, in order to determine if the client individual has any Significant Additional Needs.

- (b) The WSC shall discuss the services requested with the client or the client's legal representative, and, if available and applicable, the client advocate.
- (c) The Agency will conduct a Client an individual Review to determine whether services requested meet health and safety needs and waiver coverage and limitations. The AIM Worksheet form APD 2015 01 must be completed as part of the Client Individual Review and submitted to the Agency within 30 days of receipt of the new Allocation Algorithm Amount.
- (d) The Agency will issue a decision of the iBudget Amount within 30 days of receipt of the AIM Worksheet form. The client individual or and his or her their legal representative will be advised of the Agency's decision for the amount of the client's individual's final iBudget Amount within 30 days.
- 1. If additional documentation is requested, the deadline for the Agency's response shall be extended to 60 days following the receipt of the original request. In the event a WSC does not submit a request for SANs and the individual, the individual's representative or the client advocate disagrees with the WSC's failure to submit a SAN funding request, or if the individual or the individual's representative or client advocate are unsatisfied with the request submitted, the individual or the individual's representative may submit the SANs request to the applicable Agency regional office.
- 2. The Verification of Available Services form is a material part of the request form. Failure to include the Verification of Available Services form is a basis for denial.
- (e) The Agency shall approve an increase to the iBudget Amount if additional funding is required to meet the Significant Additional Needs subject to the provisions of the iBudget Reules. The Agency, upon completion of its review shall notify in writing the client, the WSC, and the client advocate, if any, of its decision.
- (4) After the iBudget Amount is established, if a client remains in the same living setting and experiences a significant change in condition or circumstances where the proposed needs cannot be met within the current iBudget Amount, the WSC shall request services through the significant additional needs process without the calculation of a new algorithm or the completion of the AIM Worksheet.
- (5)(4) iBudget Amounts are pro-rated as appropriate based on the length of time remaining in the fiscal year.
- (6)(5) The Agency shall ensure that the sum of all clients' projected expenditures do not exceed the Agency's annual appropriation.
- (7) This Rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

Rulemaking Authority 393.501(1), 393.0662 FS. Law Implemented 393.063, 393.0662, 409.906 FS. History–New 7-7-16, Amended

65G-4.0217 iBudget Cost Plan.

- (1) When a client's an individual's iBudget Amount is determined, the WSC must submit a cost plan proposal, which includes a completed Verification of Available Services form, that reflects the specific <u>W</u>waiver services and supports (paid and unpaid) that will assist the client individual to achieve identified goals, and the provider of those services and supports, including natural supports. The cost plan proposal is derived from person-centered planning. The Verification of Available Services form is a material part of the cost plan proposal. Failure to include the Verification of Available Services form will result in a denial of the cost plan.
- (2) The WSC shall provide documentation for requested services as specified in Section C of the WSC Cost Plan and Significant Additional Needs Job Aid to document medical necessity and compliance with Handbook coverage and limitations.
- (3)(2) Each client's individual's proposed iBudget cost plan shall be reviewed and approved by the Agency in conformance with the iBudget Rules and the Handbook. Any conflict between the Handbook and these iBudget Rules shall be resolved in favor of these rules.
- (4)(3) For a client an individual to begin receiving a specific <u>W</u>waiver service, that service must have been listed in an Approved Cost Plan and the service authorization must have been issued to the provider prior to the delivery of service.
- (5)(4) Clients Individuals must budget their funds so that their needs are met throughout the plan year. All clients individuals shall allocate iBudget funding each month for  $\underline{W}$  waiver support coordination services, which is a required service under the  $\underline{W}$  waiver.
- (6) This Rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

Rulemaking Authority 393.501(1), 393.0662 FS. Law Implemented 393.063, 393.0662, 409.906 FS. History–New 7-7-16, Amended

65G-4.0218 Significant Additional Need Funding.

- (1) Supplemental funding for Significant Additional Needs (SANs) may be of a one-time, temporary, or long-term in nature. including the loss of Medicaid State Plan or school system services due to a change in age. SANs funding requests must be based on at least one of the four categories, as follows:
- (a) An extraordinary need that would place the health and safety of the client, the client's caregiver, or the public in immediate, serious jeopardy unless the increase is approved. An extraordinary need may include, but is not limited to:
- 1. A documented history of significant, potentially lifethreatening behaviors, such as recent attempts at suicide, arson,

5081

nonconsensual sexual behavior, or self injurious behavior requiring medical attention,

- 2. A complex medical condition that requires active intervention by a licensed nurse on an ongoing basis that cannot be taught or delegated to a nonlicensed person,
- 3. A chronic comorbid condition. As used in this subparagraph, the term "comorbid condition" means a medical condition existing simultaneously but independently with another medical condition in a patient, or
- 4. A need for total physical assistance with activities such as eating, bathing, toileting, grooming, personal hygiene, lifting, transferring or ambulation.

However, the presence of an extraordinary need alone does not warrant an increase in the amount of funds allocated to a client's iBudget as determined by the algorithm.

- (b) A significant need for one time or temporary support or services that, if not provided, would place the health and safety of the client, the client's caregiver, or the public in serious jeopardy, unless the increase is approved. A significant need may include, but is not limited to, the provision of environmental modifications, durable medical equipment, services to address the temporary loss of support from a caregiver, or special services or treatment for a serious temporary condition when the service or treatment is expected to ameliorate the underlying condition. As used in this subparagraph, the term "temporary" means a period of fewer than 12 continuous months. However, the presence of such significant need for one time or temporary supports or services alone does not warrant an increase in the amount of funds allocated to a client's iBudget as determined by the algorithm.
- (c) A significant increase in the need for services after the beginning of the service plan year that would place the health and safety of the client, the client's caregiver, or the public in serious jeopardy because of substantial changes in the client's circumstances, including, but not limited to, permanent or longterm loss or incapacity of a caregiver, loss of services authorized under the state Medicaid plan due to a change in age, or a significant change in medical or functional status which requires the provision of additional services on a permanent or long term basis that cannot be accommodated within the client's current iBudget. As used in this subsection, the term "long term" means a period of 12 or more continuous months. However, such significant increase in need for services of a permanent or long term nature alone does not warrant an increase in the amount of funds allocated to a client's iBudget as determined by the algorithm.
- (d) A significant need for transportation services to a waiver-funded adult day training program or to a waiver-funded supported employment where such need cannot be accommodated within the funding authorized by the client's iBudget amount without affecting the health and safety of the

- elient, where public transportation is not an option due to the unique needs of the client, and where no other transportation resources are reasonably available. However, such increases may not result in the total of all clients' projected annual iBudget expenditures exceeding the agency's appropriation for waiver services.
- (2) The presence of a significant additional need or significant change in condition or circumstance alone does not warrant an increase in the amount of funds allocated to a client's iBudget as determined by the algorithm.
- (3)(2) A client's annual expenditures for home and community-based services Medicaid  $\underline{W}$ waiver services may not exceed the limits of his or her iBudget. The total of all clients' projected annual iBudget expenditures may not exceed the  $\underline{A}$ agency's appropriation for  $\underline{W}$ waiver services.
- (4) SANs can only be approved after the determination of a client's initial allocation amount and after the WSC has documented the availability of non-Waiver resources on the Verification of Available Services form. Nothing in this section prohibits the authorization of emergency services on a temporary basis through the Agency. Requests for SANs require:
- (a) The client to have a significant additional need as defined in this chapter; and
- (b) A significant additional need cannot be created by failing to maintain sufficient funds to cover services previously authorized in accordance with subsections 65G-4.0215(2) and (5), F.A.C.
- (5)(3) For any SANs request, Tthe WSC shall submit a SANs request cost plan proposal that reflects the specific Wwaiver services and supports (paid and unpaid) that will assist the client individual to meet achieve identified needs, goals, and the provider of those services and supports, including natural supports. with all required supporting documentation as specified in the WSC Job Aid for Cost Plans and Significant Additional Needs Documentation. The request should also include an explanation of why additional funding is needed, and any additional documentation appropriate to support the request. If there are any concerns about the accuracy of the QSI results the WSC shall submit this information as well. The documentation identified in the WSC Job Aid is material to the SANs requests. The Agency must close or deny the SANs request without such documentation.
- (a) The <u>SANs</u> request cost plan proposal shall be submitted indicating how the current budget allocation and requested SANs funds would be used. <u>The request should also include an explanation of why additional funding is needed, and any additional documentation appropriate to support the request.</u>
- (a) The <u>SANs request</u> cost plan proposal shall be submitted indicating with an updated support plan, which must include an

explanation of why additional funding is needed and indicate how the current budget allocation and requested SANs funds would be used. The request must include documentation appropriate to support the request in accordance with the WSC Job Aid for Cost Plans and Significant Additional Needs Documentation form.

- (b) Documentation of attempts within the last 30 days prior to submitting the SANs request to locate natural or community supports, third-party payers, or other sources of support to meet the client's individual's health and safety needs must also be documented and verified by the WSC on the Verification of Available Services form submitted.
- (c) If there are any concerns about the accuracy of the QSI results, the WSC shall submit this as well.
- (6)(4) If a client's an individual's iBudget Amount includes Significant Additional Needs beyond what was determined by the Allocation Algorithm, and the Agency determines that the service intensity, frequency or duration of the service(s) is no longer medically necessary, the Agency will adjust the client's individual's services to match the current need.
- (7)(a) The Agency will not consider incomplete SANs requests due to lacking material information to determine whether SANs criteria are met. A SANs request is incomplete if it does not:
- 1. Provide detail the client's current approved services, including the number and type of units and dollar amount for each service. The client to staff ratio, if applicable, must also be included;
- 2. Clearly indicate whether the current approved services are requested to continue on an annualized basis;
- 3. Clearly identify any new or increased services being requested in the current fiscal year and on an annualized basis, if applicable to that service type;
- <u>4. Include a complete Verification of Available Services</u> form;
- 5. Include documentation to support the information provided in the Verification of Available Services Form, or identify the location of the currently valid documentation in the designated data management system;
- <u>6. Place the request in the proper status for submission in the designated data management system; or </u>
- 7. Include certification that the request meets the criteria for SANs.
- (b) The Agency shall close incomplete SANs requests upon receipt.
- (8)(5) The Agency will request the documentation and information necessary to evaluate a client's an individual's increased funding requests based on the client's individual's needs and circumstances. The documentation will vary according to the funding request and may include the following as applicable: support plans, results from the Questionnaire for

Situational Information, cost plans, expenditure history, current living situation, interviews with the <u>client individual</u> and his or her providers and caregivers, prescriptions, data regarding the results of previous therapies and interventions, assessments, and provider documentation. <u>Paragraphs (a) through (c), set forth examples of the types of documentation the Agency utilizes in reviewing SANs funding requests in specific circumstances.</u>

- (a) For an extraordinary need that would place the health and safety of the client, the client's caregiver, or the public in immediate, serious jeopardy unless the increase is approved:
- 1. A documented history of significant, potentially lifethreatening behaviors, such as recent attempts at suicide, arson, nonconsensual sexual behavior, or self-injurious behavior requiring medical attention:
  - a. Psychological assessments/Psychiatric reports.
- b. Baker Act admission and discharge summaries for last 12 months.
  - c. Behavior assessments, plans and data for last 12 months.
- d. If school aged, current IEP, school behavior plan and data.
- e. If under 21—a description of behavior services accessed or attempted through the Medicaid State Plan.
- f. Incident Reports, policy reports within the last 12 months.
- g. Behavior Summary Report from the Area Behavior Analyst.
- 2. A complex medical condition that requires active intervention by a licensed nurse on an ongoing basis that cannot be taught or delegated to a non-licensed person:
- a. Supporting documentation from physician, or others that document the medically necessary situation.
- b. Prescription by a physician, ARNP or physician assistant.
  - c. List of specific duties to be performed.
  - d. Nursing care plan (if applicable).
- $\begin{array}{c} \textbf{e. Documentation from Skilled Nursing Exception Process} \\ \textbf{(if applicable)}. \end{array}$
- 3. A chronic comorbid condition. The term comorbid condition means a medical or mental health condition existing simultaneously but independently with another medical or mental health condition in a patient:

Supporting documentation from physician, or others that document the medically necessary situation.

- 4. A need for total physical assistance with activities such as eating, bathing, toileting, grooming, personal hygiene, lifting, transferring or ambulation.
  - a. Updated QSI.
  - b. Documentation from caregivers.
- (b) For a significant need for one time or temporary support or services that, if not provided, would place the health

and safety of the client, the client's caregiver, or the public in serious jeopardy, unless the increase is approved. A significant need includes, but is not limited to:

- 1. The provision of environmental modifications:
- a. Documentation of approval from landlord, if home is rented.
- b. Documentation of ownership of the home by the client or their family.
  - c. The appropriate number of bids per the Handbook.
  - d. Home Accessibility Assessment if over \$3,500.
- e. Documentation of how environmental modifications would ameliorate the need.
  - 2. Durable Medical Equipment:
- a. Prescription and recommendation by a licensed physician, ARNP, physician assistant, PT or OT.
- b. Documentation that durable medical equipment used by the client has reached the end of its useful life or is damaged, or the client's functional or physical status has changed enough to require the use of waiver funded DME that has not previously been used.
  - c. Three bids for items costing \$1,000 and over.
- 3. Services to address the temporary loss of support from a caregiver:
  - a. Description of why caregiver can no longer provide care.
  - b. Age and medical diagnoses of caregivers.
- c. Documentation from doctor(s) regarding caregiver(s) ability to provide care.
- 4. Special services or treatment for a serious temporary condition when the service or treatment is expected to ameliorate the underlying condition. Temporary means a period of fewer than 12 continuous months.
- (c) A significant increase in the need for services after the beginning of the service plan year that would place the health and safety of the client, the client's caregiver, or the public in serious jeopardy because of substantial changes in the client's circumstances, including, but not limited to:
  - 1. Permanent or long term loss or incapacity of a caregiver: a. Same criteria as subparagraph (b)3., above.
- 2. Loss of services authorized under the state Medicaid plan due to a change in age:
  - a. Medicaid Prior Service Authorization.
  - b. Documentation that other caregivers are not available.
- 3. A significant change in medical or functional status which requires the provision of additional services on a permanent or long term basis that cannot be accommodated within the client's current iBudget. As used in this subparagraph, the term "long term" means a period of 12 or more continuous months.
- (9)(6) Response to funding requests: Within 30 days of receipt of a request for SANs funding, and adjustments in the client's individual's service array, the Agency shall approve,

deny (in whole or in part), or request additional documentation concerning the request.

- (a) If the request does not include all necessary documentation, the Agency shall provide the client and WSC with a written notice of what additional documentation is required. The client or WSC shall provide the documentation within 10 days, or notify the Agency in writing that the client wishes the Agency to render its decision based upon the documentation provided.
- (b) If additional documentation is requested, the deadline for the Agency's response shall be extended to 60 days following the receipt of the original request. Nothing in this section prohibits the authorization of emergency services on a temporary basis through the Agency's Regional offices. If the client has not received a notice from the Agency approving, denying or requesting additional information within 60 days, the client or WSC may notify the Agency in writing of such failure to issue a timely notice and the Agency shall have 20 days from receipt of the Notice to approve or deny the request.
- (c) Failure of the Agency to issue this Notice within 20 days shall mean the requested funding for services are authorized as of the 21st day, and the client and service providers may treat the authorization as an approval.
- (7) No additional funding for an individual's services shall be provided if the need for the additional funding is not premised upon a need that arises after the implementation of the initial iBudget Amount, or is created by the individual's failure to ensure that funding remained sufficient to cover services previously authorized in accordance with subsections 65G-4.0215(2) and (3), F.A.C.
- (10)(8) Individual and Family Supports (IFS) <u>f</u>Funding <u>may</u> to cover temporary emergency services is authorized when needed <u>pursuant to chapter 65G-13</u>, F.A.C., while requests for Significant Additional Needs are being processed.
- (11) This Rule shall be reviewed, and if necessary, renewed through the rulemaking process five years from the effective date.

Rulemaking Authority 393.501(1), 393.0662 FS. Law Implemented 393.063, 393.0662, 409.906 FS. History–New 7-7-16, Amended

NAME OF PERSON ORIGINATING PROPOSED RULE: Lorena Fulcher

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Barbara Palmer

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: November 12, 2020

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: October 2, 2020

#### DEPARTMENT OF ECONOMIC OPPORTUNITY

#### **Division of Workforce Services**

RULE NO.: RULE TITLE:

73B-10.023 General Reporting Information

PURPOSE AND EFFECT: To provide electronic options for filing documents by employers for ease of filing; to help provide for additional identity protection measures; and to ensure forms are compliant with statutory requirements and up to date.

SUMMARY: The rules are being amended to add language advising employers about the various electronic options available for filing, correcting and updating information; add language stating that only partial social security numbers will be mailed on a RT statement of benefits form for identity protection; and update the forms to comply with current statutory requirements.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The Agency has previously performed a review of the statutory requirements and determined that rules 73B.10.023, .024, .025, .026, and .037, have no adverse impact or regulatory costs which exceed any of the criteria established in Section 120.541(2), F.S. These rules are therefore expected to be able to take effect without the need of being ratified by the Legislature.

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: 443.1317, FS.

LAW IMPLEMENTED: 443.1216, 443.131, 443.1312, 443.1313, 443.141, 443.151, 443.163, 443.171, FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dominique Young, Assistant General Counsel, Department of Economic Opportunity, 107 E. Madison Street, MSC 110, Tallahassee, Florida 32399, Dominique.Young@deo.myflorida.com, (850)245-7150

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

73B-10.023 General Reporting Information.

- (1) through (4) No change.
- (5) Corrected Reports.
- (a) Corrected Reports. Corrected reports must be filed as directed by DEO or DOR or as determined necessary by the employing unit. The decision of DEO or DOR will prevail when there is disagreement whether <u>a</u> an corrected report is necessary.
- (b) Corrected Quarterly or Annual Reports. Employers who are required, pursuant to Section 443.163 F.S., to file quarterly reports online on DOR's website at floridarevenue.com are also required to file corrections to those reports online. Employers not required to file reports online may make cCorrections to quarterly or annual reports-must be made on Form RT-8A, Correction to Employer's Quarterly or Annual Domestic Report, incorporated by reference in Rule 73B-10.037, F.A.C. Corrections to quarterly reports may also be made online at DOR's website, floridarevenue.com.
  - (6) No change.

Rulemaking Authority 443.1317 FS. Law Implemented 443.131, 443.141, 443.171 FS. History—New 8-25-92, Amended 12-28-97, Formerly 38B-2.023, Amended 1-19-03, 7-18-06, Formerly 60BB-2.023, Amended 6-2-14,\_\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Dominique Young

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Dane Eagle

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: October 21, 2020

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: 10/30/2020

#### DEPARTMENT OF ECONOMIC OPPORTUNITY

#### **Division of Workforce Services**

RULE NO.: RULE TITLE:

73B-10.025 Reports Required of Liable Employers PURPOSE AND EFFECT: To provide electronic options for filing documents by employers for ease of filing; to help provide for additional identity protection measures; and to ensure forms are compliant with statutory requirements and up to date.

SUMMARY: The rules are being amended to add language advising employers about the various electronic options available for filing, correcting and updating information; add language stating that only partial social security numbers will be mailed on a RT statement of benefits form for identity protection; and update the forms to comply with current statutory requirements.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The Agency has previously performed a review of the statutory requirements and determined that rules 73B.10.023, .024, .025, .026, and .037, F.A.C., have no adverse impact or regulatory costs which exceed any of the criteria established in Section 120.541(2), F.S. These rules are therefore expected to be able to take effect without the need of being ratified by the Legislature.

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: 443.1317, FS.

LAW IMPLEMENTED: 443.1216, 443.131, 443.1312, 443.1313, 443.141, 443.151, 443.163, 443.171, FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dominique Young, Assistant General Counsel, Department of Economic Opportunity, 107 E. Madison Street, MSC 110, Tallahassee, Florida 32399, Dominique.Young@deo.myflorida.com, (850)245-7150

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

73B-10.025 Reports Required of Liable Employers.

- (1) Employer's Quarterly Reports.
- (a) Each contributing and reimbursing employer must file quarterly reports on Form RT-6, Employer's Quarterly Report, incorporated by reference in Rule 73B-10.037, F.A.C., unless the employer solely employs workers who perform domestic services and has been approved by DOR to file reports annually pursuant to Section 443.131(1), F.S. Employers who employed 10 or more employees in any quarter during the preceding state fiscal year are required, pursuant to Section 443.163, F.S., to file the quarterly reports, including corrections to those reports, online on DOR's website at floridarevenue.com. Payrolling, as defined in Rule 73B-10.022, F.A.C., is not permitted.

Employers that engage in payrolling are subject to the penalties set forth in Section 443.131(3)(g), F.S.

- (b) No change.
- (2) Reports of Change in Status.
- (a) Sale, transfer, cessation, or other disposition of a business or part of a business. Each liable employer must report any change in status to DOR by updating their account online on DOR's website at floridarevenue.com, or by using Form RTS-3, Employer Account Change Form, incorporated by reference in Rule 73B-10.037, F.A.C., or by writing to DOR. The report must be signed by a person with authority to submit such reports and:
  - 1. through 5. No change.
- (b) Other Changes. Employers must report changes to business name, address, ownership, officers, legal entity status (such as from sole proprietorship to corporation or from partnership to limited liability company) and business operations by updating their account online on DOR's website at floridarevenue.com, or by completing in the manner required on Form RTS-3, Employer Account Change Form, or by writing to DOR.
  - (3) No change.

Rulemaking Authority 443.1317 FS. Law Implemented 443.1216, 443.131, 443.141, 443.163, 443.171(5) FS. History—New 8-25-92, Formerly 38B-2.025, Amended 1-19-03, 7-18-06, 2-24-10, Formerly 60BB-2.025, Amended 6-2-14, 10-16-17.

NAME OF PERSON ORIGINATING PROPOSED RULE: Dominique Young

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Dane Eagle

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: 10/21/2020

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: 10/30/20220

#### DEPARTMENT OF ECONOMIC OPPORTUNITY

#### **Division of Workforce Services**

RULE NO.: RULE TITLE:

PURPOSE AND EFFECT: To provide electronic options for filing documents by employers for ease of filing; to help provide for additional identity protection measures; and to ensure forms are compliant with statutory requirements and up

**Determinations to Liable Employers** 

to date.

73B-10.026

SUMMARY: The rules are being amended to add language advising employers about the various electronic options available for filing, correcting and updating information; add language stating that only partial social security numbers will be mailed on a RT statement of benefits form for identity protection; and update the forms to comply with current statutory requirements.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The Agency has previously performed a review of the statutory requirements and determined that rules 73B.10.023, .024, .025, .026, and .037, F.A.C., have no adverse impact or regulatory costs which exceed any of the criteria established in Section 120.541(2), F.S. These rules are therefore expected to be able to take effect without the need of being ratified by the Legislature.

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: 443.1317, FS.

LAW IMPLEMENTED: 443.1216, 443.131, 443.1312, 443.1313, 443.141, 443.151, 443.163, 443.171, FS.

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dominique Young, Assistant General Counsel, Department of Economic Opportunity, 107 E. Madison Street, MSC 110, Tallahassee, Florida 32399, Dominique.Young@deo.myflorida.com, (850)245-7150

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

73B-10.026 Determinations to Liable Employers.

- (1) Notice of Benefits Paid and Charged, Invoiced, or Credited. A statement mailed to the employer within 30 days after the end of each calendar quarter will include the name and <u>partial</u> social security number of each claimant for whom benefits were charged, invoiced, or credited to the employer's account during the previous calendar quarter. Notification to contributing employers is provided on Form RT-1, Notice of Benefits Paid. Notification to reimbursing employers is provided on Form RT-29, Reemployment Tax Reimbursement Invoice.
  - (a) through (c) No change.
  - (2) through (4) No change.

Rulemaking Authority 443.1317 FS. Law Implemented 443.131(3), 443.1312, 443.1313, 443.141(2)(b), 443.151(3)(c), (d), (4)(b) FS. History—New 8-25-92, Formerly 38B-2.026, Amended 1-19-03, 7-18-06, Formerly 60BB-2.026, Amended 6-2-14, 10-16-17, \_\_\_\_\_\_.

NAME OF PERSON ORIGINATING PROPOSED RULE: Dominique Young

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Dane Eagle

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: 10/21/2020

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: 10/30/2020

#### DEPARTMENT OF ECONOMIC OPPORTUNITY

#### **Division of Workforce Services**

RULE NO.: RULE TITLE: 73B-10.037 Public Use Forms

PURPOSE AND EFFECT: To provide electronic options for filing documents by employers for ease of filing; to help provide for additional identity protection measures; and to ensure forms are compliant with statutory requirements and up to date.

SUMMARY: The rules are being amended to add language advising employers about the various electronic options available for filing, correcting and updating information; add language stating that only partial social security numbers will be mailed on a RT statement of benefits form for identity protection; and update the forms to comply with current statutory requirements.

SUMMARY OF STATEMENT OF ESTIMATED REGULATORY COSTS AND LEGISLATIVE RATIFICATION:

The Agency has determined that this will not have an adverse impact on small business or likely increase directly or indirectly regulatory costs in excess of \$200,000 in the aggregate within one year after the implementation of the rule. A SERC has not been prepared by the Agency.

The Agency has determined that the proposed rule is not expected to require legislative ratification based on the statement of estimated regulatory costs or if no SERC is required, the information expressly relied upon and described herein: The Agency has previously performed a review of the statutory requirements and determined that rules 73B.10.023, .024, .025, .026, and .037, F.A.C., have no adverse impact or regulatory costs which exceed any of the criteria established in Section 120.541(2), F.S. These rules are therefore expected to be able to take effect without the need of being ratified by the Legislature.

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: 443.1317** 

LAW IMPLEMENTED: 443.1216, 443.131, 443.1312, 443.1313, 443.141, 443.151, 443.163, 443.171, F.S

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

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Dominique Young, Assistant General Counsel, Department of Economic Opportunity, 107 E. Madison Street, MSC 110, Tallahassee, Florida 32399, Dominique.Young@deo.myflorida.com, (850)245-7150

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

73B-10.037 Public Use Forms.

- (1) No change.
- (2) Copies of these forms are available, without cost, by one or more of the following methods: 1) downloading the form from the DOR's Internet site at <u>floridarevenue.com</u> www.myflorida.com/dor/forms; or, 2) calling DOR at (850)488-6800, Monday through Friday, excluding holidays 1(800)352 3671, Monday through Friday, 8:00 a.m. to 7:00 p.m. (Eastern Time); or, 3) visiting any local Department of Revenue Service Center; or, 4) writing the Florida Department of Revenue, Taxpayer Services, 5050 West Tennessee Street, Tallahassee, Florida 32399-0112. Persons with hearing or speech impairments may call the Florida Relay Service at 1(800)955-8770 (Voice) and 1(800)955-8771 (TTY).

Form	Title	Effect
Num		ive
ber		Date
(3)(a)	No change	
: RT-		
6		
(b):	No change	
RT-		
6A		
(c):	No change	
RT-		
6EW		
(d):	Employer's Quarterly Report	01/19
RT-	Instructions (R. 01/19) (R. 10/17)	<del>10/17</del>
6N	( <u>http://www.flrules.org/Gateway/refere</u>	_
	nce.asp?No=Ref-XXXXX	
	( <u>http://www.flrules.org/Gateway/refere</u>	
	nce.asp?No=Ref 08722)	

(e): RT- 6NF	Employer's Quarterly Report for Out- of-State Taxable Wages ( <u>R. 01/19</u> ) ( <del>R. 07/16</del> ) (http://www.flrules.org/Gateway/reference.asp?No=Ref-XXXXX) (http://www.flrules.org/Gateway/reference.asp?No=Ref 07137)	01/19 7-25- 16
(4)(a) : RT- 7	No change	
(b): RT- 7A	No change	
(5): RT- 8A	Correction to Employer's Quarterly or Annual Domestic Report (R. 01/19) (R. 07/16) (http://www.flrules.org/Gateway/reference.asp?No=Ref-XXXXX) (http://www.flrules.org/Gateway/reference.asp?No=Ref-07137)	01/19 7-25- 16
(6): RT- 19	No change	
(6)(a) : RT- 28	No change	
(b): RT- 28G	No change	
(c): RT- 28T	No change	
(7): RT- 40	No change	
(8): RT- 89	Reemployment Tax Instructions for Excess Wage Computation (R. 01/19) (R. 12/15) (http://www.flrules.org/Gateway/reference.asp?No=Ref-XXXXX) (http://www.flrules.org/Gateway/reference.asp?No=Ref-06224)	01/19 12/20 15
(9): RTS- 1C	No change	
(10)( a): RTS- 1S	No change	

(b):	No change	
RTS-	-	
1SA		
(11):	No change	
RTS-		
2	N 1	
(12):	No change	
RTS-		
(13):	No change	
RTS-	No change	
5		
(14)(	No change	
a):		
RTS-		
6		
(b):	No change	
RTS-		
6A		
(c):	No change	
RTS-		
6B	No abanca	
(d): RTS-	No change	
6C		
(15):	No change	
RTS-		
8		
(16):	No change	
RTS-		
9		
(17):	No change	
RTS-		
10		01/10
(18):	Application for Common Paymaster (R.	01/19 11
RTS- 70	01/19) (R. 04/14) (http://www.flrules.org/Gateway/refere	<del>11-</del> 25-14
'0	nce.asp?No=Ref-XXXXX)	<del>23 14</del>
	(http://www.flrules.org/Gateway/refere	
	nce.asp?No=Ref 04755)	
(19):	Quarterly Concurrent Employment	01/19
RTS-	Report (R. 01/19) (R. 01/15)	11-
71	(http://www.flrules.org/Gateway/refere	<del>25 14</del>
	nce.asp?No=Ref-XXXXX)	
	(http://www.flrules.org/Gateway/refere	
	<u>nce.asp?No=Ref_04755</u> )	
(20):	No change	
RTS-		
72		

(21):	No change	l
RTS-		١
6061		ı

Rulemaking Authority 443.1317 FS. Law Implemented 443.131, 443.141, 443.171(5) FS. History—New 1-19-03, Amended 7-8-04, 7-18-06, 12-27-06, Formerly 60BB-2.037, Amended 6-2-14, 11-25-14, 12-27-15, 7-25-16, 10-16-17-,

NAME OF PERSON ORIGINATING PROPOSED RULE: Dominique Young

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Dane Eagle

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: 10/21/2020

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: 10/30/2020

## Section III Notice of Changes, Corrections and Withdrawals

#### **NONE**

### Section IV Emergency Rules

#### **NONE**

# Section V Petitions and Dispositions Regarding Rule Variance or Waiver

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Division of Hotels and Restaurants

RULE NO.: RULE TITLE:

61C-1.004 General Sanitation and Safety Requirements

The Florida Department of Business and Professional Regulation, Division of Hotels and Restaurants hereby gives notice: On November 12, 2020 the Division of Hotels and Restaurants received a Petition for an Emergency Variance for paragraph 61C-1.004(1)(a), Florida Administrative Code and paragraph 5-202.11(A), 2017 FDA Food Code from SMILEY BERRY LLC located in St. Augustine. The above referenced F.A.C. addresses the requirement that each establishment have an approved plumbing system installed to transport potable water and wastewater. They are requesting to utilize holding tanks to provide potable water and to collect wastewater at the handwash and 3-compartment sinks.

The Petition for this variance was published in Vol.46/222 on November 13, 2020. The Order for this Petition was signed and approved on November 18, 2020. After a complete review of the variance request, the Division finds that the application of this Rule will create a financial hardship to the food service establishment. Furthermore, the Division finds that the Petitioner meets the burden of demonstrating that the underlying statute has been achieved by the Petitioner ensuring the wastewater holding tank for the handwash sink is emptied at a frequency as to not create a sanitary nuisance; and potable water provided must come from an approved source and be protected from contamination during handling. The Petitioner shall also ensure that the handwash sinks are provided with hot and cold running water under pressure, soap, an approved hand drying device and a handwashing sign.

A copy of the Order or additional information may be obtained by contacting: Kasimira.Kelly@myfloridalicense.com, Division of Hotels and Restaurants, 2601 Blair Stone Road, Tallahassee, Florida 32399-1011.

## DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Division of Hotels and Restaurants

RULE NO.: RULE TITLE:

61C-4.010 Sanitation and Safety Requirements

The Florida Department of Business and Professional Regulation, Division of Hotels and Restaurants hereby gives notice: On November 9, 2020 the Division of Hotels and Restaurants received a Petition for an Emergency Variance for paragraph 3-305.11(A)(2), 2017 FDA Food Code, Section 3-305.14, 2017 FDA Food Code, Section 6-202.15, 2017 FDA Food Code, Section 6-202.16, 2017 FDA Food Code, subsection 61C-4.010(1), Florida Administrative Code, and subsection 61C-4.010(6), Florida Administrative Code from J & M Food Service located in Ft Myers. The above referenced F.A.C. addresses the requirement for proper handling and dispensing of food. They are requesting to dispense bulk time/temperature control for safety foods from an open air mobile food dispensing vehicle.

The Petition for this variance was published in Vol 46/220 on November 10, 2020. The Order for this Petition was signed and approved on November 18, 2020. After a complete review of the variance request, the Division finds that the application of this Rule will create a financial hardship to the food service establishment. Furthermore, the Division finds that the Petitioner meets the burden of demonstrating that the underlying statute has been achieved by the Petitioner ensuring that each pan within the steam table is properly covered with an individual lid; the steam table is enclosed within a cabinet with

tight-fitting doors, and is protected by an air curtain installed and operated according to the manufacturer's specifications that protects against flying vermin or other environmental contaminants; all steam table foods must be properly reheated for hot holding at approved commissaries and held hot at the proper minimum temperature per the parameters of the currently adopted FDA Food Code; and steam table food is to be dispensed by the operator with no customer self-service. The Petitioner shall also strictly adhere to the operating procedures and copies of the variance and operating procedures are to be present on the MFDV during all periods of operation.

A copy of the Order or additional information may be obtained by contacting: Kasimira.Kelly@myfloridalicense.com, Division of Hotels and Restaurants, 2601 Blair Stone Road, Tallahassee, Florida 32399-1011.

### Section VI Notice of Meetings, Workshops and Public Hearings

DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

Division of Administration

The Florida Agriculture Center & Horse Park Authority announces a public meeting to which all persons are invited. DATE AND TIME: Wednesday, December 2, 2020, 4:00 p.m. PLACE: Location: Zoom/Conference Call, Dial in number: (929)436-2866, Meeting ID: 886 4187 8283, Passcode: 612209 GENERAL SUBJECT MATTER TO BE CONSIDERED: The Florida Agriculture Center & Horse Park Authority Board will conduct a meeting to discuss general business information.

A copy of the agenda may be obtained by contacting: Jason Reynolds via email at jreynolds@flhorsepark.com.

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 2 days before the workshop/meeting by contacting: Jason Reynolds via email at jreynolds@flhorsepark.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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Jason Reynolds via email at jreynolds@flhorsepark.com.

### DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

Florida Forest Service

The Florida Department of Agriculture and Consumer Services, Florida Forest Service announces a conference call of the Off-Highway Vehicle Recreation Advisory Committee announces a telephone conference call to which all persons are invited.

DATE AND TIME: November 30, 2020, 11:00 a.m.

PLACE: Conference Call United States (Toll Free): 1(866)899-4679, Access Code: 928-276-381

GENERAL SUBJECT MATTER TO BE CONSIDERED: General meeting items of the Off-Highway Vehicle Recreation Advisory Committee.

A copy of the agenda may be obtained by contacting: Lorna.Radcliff@FDACS.gov.

## DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

Division of Food Safety

The Florida Food Safety and Food Defense Advisory Council announces a telephone conference call to which all persons are invited.

DATE AND TIME: December 15, 2020, 10:00 a.m. – 12:00 Noon

PLACE: This meeting will be conducted by conference call, rather than in-person. Phone number: 1(888)585-9008, Organizer PIN: 4526717

GENERAL SUBJECT MATTER TO BE CONSIDERED: The purpose of the Council is to serve as a forum for presenting, investigating, and evaluating issues of current importance to the assurance of a safe and secure food supply. The Council shall consider the development of appropriate advice or recommendations on food safety or food defense issues.

A copy of the agenda may be obtained by contacting: Nichole Enfinger at Nichole.Enfinger@FDACS.gov.

For more information, you may contact: Nichole Enfinger at Nichole.Enfinger@FDACS.gov.

#### DEPARTMENT OF EDUCATION

State Board of Education

The State Advisory Committee for the Education of Exceptional Students' Executive Committee announces a public meeting to which all persons are invited.

DATES AND TIMES: The State Advisory Committee for the Education of Exceptional Students' Executive Committee, Thursday, December 3, 2020, 8:30 a.m. – 9:00 a.m.; The State Advisory Committee for the Education of Exceptional, Thursday, December 3, 2020, 9:00 a.m. – 3:30 p.m.; Opportunity for Public Comment, Thursday, December 3, 2020, 2:00 p.m.

PLACE: Virtual meeting by phone: 1(888)585-9008, (424406595)

GENERAL SUBJECT MATTER TO BE CONSIDERED: Agenda topics include Bureau of Exceptional Education and Student Services Updates; discussion related to updates. A copy

of the agenda may be obtained by contacting: State Advisory Committee, Bureau of Exceptional Education and Student Services, Florida Department of Education, 325 West Gaines Street, Suite 614, Tallahassee, Florida 32399-0400.

A copy of the agenda may be obtained by contacting: Jessica Brattain, Bureau of Exceptional Education and Student Services, at (850)245-0475.

For more information, you may contact: Jessica Brattain, Bureau of Exceptional Education and Student Services, at (850)245-0475.

#### DEPARTMENT OF LAW ENFORCEMENT

The Department of Law Enforcement announces a telephone conference call to which all persons are invited.

DATE AND TIME: Thursday, December 17, 2020, 12:30 p.m. -2:30 p.m.

PLACE: https://global.gotomeeting.com/join/157389165 OR call 1(877)309-2073, access code 157-389-165

GENERAL SUBJECT MATTER TO BE CONSIDERED: MEPIC Advisory Board

A copy of the agenda may be obtained by contacting: FDLE's MEPIC coordinator at (850)544-8536.

### PUBLIC SERVICE COMMISSION

#### FAR NOTICE OF CUSTOMER MEETING

The Florida Public Service Commission announces a public customer meeting in the following docket to which all persons are invited.

DOCKET NO. AND TITLE: Docket No. 20200169-WS-Application for staff-assisted rate case in Lake County, and request for interim rate increase, by Lake Yale Utilities, LLC. DATE AND TIME: Wednesday, December 16, 2020, 9:30 a.m. PLACE: Registered customers and other interested persons will participate by telephone using the GoToMeeting Platform. The public may view a live stream of the customer meeting online using the link available at http://www.floridapsc.com/Conferences/AudioVideoEventCo verage.

#### GENERAL SUBJECT MATTER TO BE CONSIDERED:

The purpose of the meeting is to give customers and other interested persons an opportunity to offer comments regarding the quality of service the utility provides, the proposed rate increase, and to ask questions and comment on other issues. One or more of the Commissioners of the Florida Public Service Commission may attend and participate in this meeting. For questions, contact Commission staff:

Technical: Penny Buys, (850)413-6518, Legal: Charles Murphy, (850)413-6191.

SPECIAL COVID-19 CONSIDERATIONS: Due to the COVID-19 Pandemic, the Commission must limit the manner in which the public may participate or view the customer meeting. Due to these extraordinary circumstances, no member of the public may attend in person.

Persons wishing to comment at the customer meeting must register by contacting the Commission via email at speakersignup@psc.state.fl.us or calling (850)413-7080, preferably two business days prior to the meeting. After registering to comment, either by email or phone, registrants will be provided further instructions on how to participate, including the call-in number. Those who do not have access to the internet, may call (850) 413-7999 to listen to the meeting. ADA: In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate at this proceeding should contact the Office of Commission Clerk no later than five days prior to the hearing at 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850 or (850)413-6770 (Florida Relay Service, 1(800)955-8770 Voice or 1(800)955-8771 TDD).

EMERGENCY CANCELLATION OF MEETING: If settlement of the case or a named storm or other disaster requires cancellation of the proceedings, Commission staff will attempt to give timely direct notice to the parties. Notice of cancellation will also be provided on the Commission's website (http://www.floridapsc.com) under the Hot Topics link found on the home page. Cancellation can also be confirmed by calling the Office of the General Counsel at (850)413-6199.

## PUBLIC SERVICE COMMISSION FAR NOTICE OF CUSTOMER MEETING

The Florida Public Service Commission announces a public customer meeting in the following docket to which all persons are invited.

DOCKET NO. AND TITLE: Docket No. 20200168-WU-Application for staff-assisted rate case in Polk County, and request for interim rate increase, by McLeod Gardens Utilities, LLC

DATE AND TIME: Wednesday, December 16, 2020, 6:00 p.m. PLACE: Registered customers and other interested persons will participate by telephone using the GoToMeeting Platform. The public may view a live stream of the customer meeting online using the link available at http://www.floridapsc.com/Conferences/AudioVideoEventCo verage.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The purpose of the meeting is to give customers and other interested persons an opportunity to offer comments regarding the quality of service the utility provides, the proposed rate increase, and to ask questions and comment on other issues. One or more of the Commissioners of the Florida Public Service Commission

may attend and participate in this meeting. For questions, contact Commission staff: Technical: Clayton Lewis, (850)413-6578, Legal: Rachael Dziechciarz, (850)413-6212. SPECIAL COVID-19 CONSIDERATIONS: Due to the COVID-19 Pandemic, the Commission must limit the manner in which the public may participate or view the customer meeting. Due to these extraordinary circumstances, no member

of the public may attend in person.

Persons wishing to comment at the customer meeting must register by contacting the Commission via email at speakersignup@psc.state.fl.us or calling (850)413-7080, preferably two business days prior to the meeting. After registering to comment, either by email or phone, registrants will be provided further instructions on how to participate, including the call-in number. Those who do not have access to the internet, may call (850)413-7999 to listen to the meeting.

ADA: In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate at this proceeding should contact the Office of Commission Clerk no later than five days prior to the hearing at 2540 Shumard Oak Boulevard, Tallahassee, Florida 32399-0850 or (850)413-6770 (Florida Relay Service, 1(800)955-8770 Voice or 1(800)955-8771 TDD).

EMERGENCY CANCELLATION OF MEETING: If settlement of the case or a named storm or other disaster requires cancellation of the proceedings, Commission staff will attempt to give timely direct notice to the parties. Notice of cancellation will also be provided on the Commission's website (http://www.floridapsc.com) under the Hot Topics link found on the home page. Cancellation can also be confirmed by calling the Office of the General Counsel at (850)413-6199.

#### REGIONAL PLANNING COUNCILS

East Central Florida Regional Planning Council

The Local Emergency Preparedness Committee announces a public meeting to which all persons are invited.

DATE AND TIME: Friday, December 18, 2020, 10:00 a.m.

PLACE: VIRTUAL MEETING

GENERAL SUBJECT MATTER TO BE CONSIDERED: EPCRA Community right-to-know

A copy of the agenda may be obtained by contacting: Michelle Cechowski at michelle@ecfrpc.org to receive the meeting packet.

For more information, you may contact: Michelle Cechowksi at (407)245-0300, ext. 317 or michelle@ecfrpc.org.

#### REGIONAL PLANNING COUNCILS

Southwest Florida Regional Planning Council

RULE NO.: RULE TITLE:

29I-1.003 Staff Functions; General Description

The Southwest Florida Regional Planning Council announces a public meeting to which all persons are invited.

DATE AND TIME: November 30, 2020, 10:00 a.m.

PLACE: VIRTUAL MEETING

GENERAL SUBJECT MATTER TO BE CONSIDERED: Meeting of the SWFRPC's Executive Committee.

A copy of the agenda may be obtained by contacting: Katelyn Kubasik, kkubasik@swfrpc.org.

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 48 hours before the workshop/meeting by contacting: Katelyn Kubasik, kkubasik@swfrpc.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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Katelyn Kubasik, kkubasik@swfrpc.org.

#### WATER MANAGEMENT DISTRICTS

South Florida Water Management District

The South Florida Water Management District announces a public meeting to which all persons are invited.

DATE AND TIME: Wednesday, December 2, 2020, 10:00 a.m. C-43 (Caloosahatchee) West Basin Storage Reservoir Water Quality Component Feasibility Study

PLACE: This meeting will be conducted via Zoom, a media technology free for the public to use. https://zoom.us/webinar/register/WN\_auoV2VWJRi2YA0c-xgA0FO

GENERAL SUBJECT MATTER TO BE CONSIDERED: The C-43 (Caloosahatchee) West Basin Storage Reservoir Water Quality Component Feasibility Study Working Group announces a public meeting to present findings of the feasibility study and take public comment. The four recommendations by the study will be presented and include conventional/innovative biological, physical, and chemical treatment for water quality improvement. The treatment recommendations include pretreatment, in-reservoir treatment, and/or post-treatment application to the C-43 (Caloosahatchee) West Basin Storage Reservoir.

The public and stakeholders will have an opportunity to view and comment during the workshop by utilizing the following link:

https://zoom.us/webinar/register/WN\_auoV2VWJRi2YA0c-xgA0FQ

This link can also be found on the District's website at www.SFWMD.gov/meetings, and will go live at approximately 10:00 a.m. on December 2, 2020.

All of this meeting will be conducted via media technology.

One or more members of the Governing Board of the South Florida Water Management District may attend these meetings. No Governing Board action will be taken.

A copy of the agenda may be obtained by contacting: Kim Fikoski, (239)338-2929, ext. 7737, or kfikoski@sfwmd.gov, seven days prior to the meeting.

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 7 days before the workshop/meeting by contacting: Rosie Byrd, District Clerk, at rbyrd@sfwmd.gov. 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).

For more information, you may contact: Kim Fikoski, kfikoski@sfwmd.gov, (239)338-2929, ext. 7737.

#### WATER MANAGEMENT DISTRICTS

South Florida Water Management District

RULE NO.: RULE TITLE:

40E-2.091 Publications Incorporated by Reference

The South Florida Water Management District announces a hearing to which all persons are invited.

DATE AND TIME: Thursday, December 10, 2020, 9:00 a.m., during the District's Governing Board Monthly Meeting

PLACE: This meeting will be conducted via Zoom, a media technology free for the public to use. A link will be provided on the District's website at www.SFWMD.gov/meetings.

GENERAL SUBJECT MATTER TO BE CONSIDERED: Adopt Amendments to Rule 40E-2.091, F.A.C., and the "Applicant's Handbook for Water Use Permit Applications within the South Florida Water Management District" which includes implementing criteria for the prospective Everglades Agricultural Area Reservoir Water Reservation. Written comments and any documentation supporting verbal comments that will be made at the public hearing should be submitted to Jan Sluth, Sr. Paralegal, jsluth@sfwmd.gov by noon on Thursday, December 10, 2020, to ensure the Governing Board receives the information. All comments and supporting documents submitted before the Governing Board's Chairman announces the closure of the public hearing on rule adoption shall be included in the record.

A copy of the agenda may be obtained by contacting: The agenda containing information on this meeting will be posted to the District's website www.SFWMD.gov/meetings, seven

days prior to the meeting. Or, you can email Rosie Byrd at rbyrd@sfwmd.gov.

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 7 days before the workshop/meeting by contacting: The agenda containing information on this meeting will be posted to the District's website www.SFWMD.gov/meetings, seven days prior to the meeting. Or, you can email Rosie Byrd at rbyrd@sfwmd.gov. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Rosie Byrd at rbyrd@sfwmd.gov.

#### WATER MANAGEMENT DISTRICTS

South Florida Water Management District

**RULE NOS.:RULE TITLES:** 

40E-10.021 Definitions

40E-10.031 Water Reservations Implementation

40E-10.061 Water Reservation Areas: Lower East Coast Planning Area

The South Florida Water Management District announces a hearing to which all persons are invited.

DATE AND TIME: Thursday, December 10, 2020, 9:00 a.m., during the District's Governing Board Monthly Meeting

PLACE: This meeting will be conducted via Zoom, a media technology free for the public to use. A link will be provided on the District's website at www.SFWMD.gov/meetings.

GENERAL SUBJECT MATTER TO BE CONSIDERED: Adopt Amendments to Rules 40E-10.021, 40E-10.031, and 40E-10.061, F.A.C., for the prospective Everglades Agricultural Area Reservoir Water Reservation. Written comments and any documentation supporting verbal comments that will be made at the public hearing should be submitted to Jan Sluth, Sr. Paralegal, jsluth@sfwmd.gov by noon on Thursday, December 10, 2020, to ensure the Governing Board receives the information. All comments and supporting documents submitted before the Governing Board's Chairman announces the closure of the public hearing on rule adoption shall be included in the record.

A copy of the agenda may be obtained by contacting: The agenda containing information on this meeting will be posted to the District's website www.SFWMD.gov/meetings, seven

days prior to the meeting. Or, you can email Rosie Byrd at rbvrd@sfwmd.gov.

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 7 days before the workshop/meeting by contacting: The agenda containing information on this meeting will be posted to the District's website www.SFWMD.gov/meetings, seven days prior to the meeting. Or, you can email Rosie Byrd at rbyrd@sfwmd.gov. 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)

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Rosie Byrd at rbyrd@sfwmd.gov.

## DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Barbers' Board

The Florida Barbers' Board announces a telephone conference call to which all persons are invited.

DATE AND TIME: December 8, 2020, 10:00 a.m.

PLACE: CONFERENCE NUMBER: 1(888)585-9008, PARTICIPANT CODE: 241687833.

GENERAL SUBJECT MATTER TO BE CONSIDERED: General business matters.

A copy of the agenda may be obtained by contacting: Florida Barbers' Board, 2601 Blair Stone, Tallahassee, Florida, 32399, (850)487-1395.

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: Florida Barbers' Board, 2601 Blair Stone, Tallahassee, Florida, 32399, (850)487-1395. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Florida Barbers' Board, 2601 Blair Stone, Tallahassee, Florida, 32399, (850)487-1395.

## DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Construction Industry Licensing Board

The Construction Industry Licensing Board announces a public meeting to which all persons are invited.

DATES AND TIMES: Wednesday, December 9, 2020, 12:00 Noon; Thursday, December 10, 2020, 8:30 a.m.; Friday, December 11, 2020, 8:30 a.m.

PLACE: DoubleTree Hotel Tallahassee, 101 S Adams St, Tallahassee, FL 32301, (850)224-5000

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business, disciplinary and committee meetings of the Board.

A copy of the agenda may be obtained by contacting: Donald Shaw, Senior Management Analyst Supervisor, 2601 Blair Stone Rd, Tallahassee, FL 32399-1039, (850)717-1983.

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: Donald Shaw, Senior Management Analyst Supervisor, 2601 Blair Stone Rd, Tallahassee, FL 32399-1039, (850)717-1983. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Donald Shaw, Senior Management Analyst Supervisor, 2601 Blair Stone Rd, Tallahassee, FL 32399-1039, (850)717-1983.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Occupational Therapy announces a public meeting to which all persons are invited.

DATES AND TIMES: February 22, 2021, 9:00 a.m. ET; May 17, 2021, 9:00 a.m. ET; August 9, 2021, 9:00 a.m. ET; November 8, 2021, 9:00 a.m. ET

PLACE: Holiday Inn Tallahassee East Capitol- University, 2003 Apalachee Parkway, Tallahassee, FL 32301

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Occupational Therapy, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: www.floridasoccupationaltherapy.gov.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)901-6528. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Physical Therapy announces a public meeting to which all persons are invited.

DATES AND TIMES: May 13, 2021, 6:30 p.m. ET; May 14, 2021 8:00 a.m. ET

PLACE: Rosen Plaza Hotel, 9700 International Drive, Orlando, FL, 32819

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Physical Therapy, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridasphysicaltherapy.gov/.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)245-4444. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Physical Therapy announces a public meeting to which all persons are invited.

DATES AND TIMES: August 26, 2021, 6:30 p.m. ET; August 27, 2021, 8:00 a.m. ET

PLACE: Mission Inn Resort, 10400 County Road 48, Howie In the Hills, FL, 34737

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Physical Therapy, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridasphysicaltherapy.gov/.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)245-4444. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Physical Therapy announces a public meeting to which all persons are invited.

DATES AND TIMES: December 9, 2021, 6:30 p.m. ET; December 10, 2021, 8:00 a.m. ET

PLACE: Aloft Jacksonville Tapestry Park, 4812 Deer Lake Drive West, Jacksonville, FL, 32246

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Physical Therapy, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridasphysicaltherapy.gov/.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)245-4444. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Psychology announces a public meeting to which all persons are invited.

DATE AND TIME: April 23, 2021, 8:00 a.m. E.T.

PLACE: Embassy Suites Tampa USF, 3705 Spectrum Blvd, Tampa, FL, 33612

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Psychology, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridaspsychology.gov/.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)901-6528. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Psychology announces a public meeting to which all persons are invited.

DATE AND TIME: July 23, 2021, 8:00 a.m. CT

PLACE: Sheraton Panama City Beach Golf & Spa Resort, 4114 Jan Cooley Drive, Panama City Beach, FL 32408

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Psychology, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridaspsychology.gov/.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)901-6528. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Psychology announces a public meeting to which all persons are invited.

DATE AND TIME: October 29, 2021, 8:00 a.m. E.T.

PLACE: Aloft Jacksonville Tapestry Park, 4812 Deer Lake Drive West, Jacksonville, FL 32246

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Psychology, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridaspsychology.gov/

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)901-6528. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Occupational Therapy announces a public meeting to which all persons are invited. DATES AND TIMES: February 22, 2021, 8:00 a.m. ET; May

17, 2021, 8:00 a.m. ET; August 9, 2021, 8:00 a.m. ET; November 8, 2021, 8:00 a.m. ET

PLACE: Holiday Inn Tallahassee East Capitol- University, 2003 Apalachee Parkway, Tallahassee, FL 32301

GENERAL SUBJECT MATTER TO BE CONSIDERED: Probable Cause Panel Meeting. A meeting or portion of a probable cause panel meeting is public only if a case or cases are public by reason of reconsideration.

A copy of the agenda may be obtained by contacting: The Board of Occupational Therapy, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: www.floridasoccupationaltherapy.gov.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)901-6528. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Respiratory Therapy announces a public meeting to which all persons are invited.

DATE AND TIME: April 9, 2021, 8:30 a.m. ET

PLACE: Hutchinson Island Marriott Resort, 555 NE Ocean Boulevard, Stuart, FL, 34996

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Respiratory Care, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridasrespiratorycare.gov/.

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 48 days before the workshop/meeting by contacting: The Department of Health at (850)245-4444. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing,

he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Respiratory Therapy announces a public meeting to which all persons are invited.

DATE AND TIME: July 16, 2021, 8:30 a.m. ET

PLACE: Embassy Suites by Hilton, 555 N. Westshore Boulevard, Tampa, FL, 33609

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Respiratory Care, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridasrespiratorycare.gov/.

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 48 hours before the workshop/meeting by contacting: The Department of Health at (850)245-4444. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Division of Medical Quality Assurance

The Department of Health, Board of Respiratory Therapy announces a public meeting to which all persons are invited.

DATE AND TIME: October 15, 2021, 8:30 a.m. ET

PLACE: Aloft Jacksonville Tapestry Park, 4812 Deer Lake Drive West, Jacksonville, FL, 32246

GENERAL SUBJECT MATTER TO BE CONSIDERED: General Business Meeting

A copy of the agenda may be obtained by contacting: The Board of Respiratory Care, 4052 Bald Cypress Way, Bin C05, Tallahassee, FL 32399-3255, by calling the board office at (850)245-4373 or by visiting the website: http://floridasrespiratorycare.gov/.

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 48 hours before the workshop/meeting by

contacting: The Department of Health at (850)245-4444. 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). 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

#### DEPARTMENT OF HEALTH

Board of Chiropractic Medicine

The Department of Health announces a telephone conference call to which all persons are invited.

DATE AND TIME: December 1, 2020, 2:00 p.m.

PLACE: 1(888)585-9008, 136-103-141 participant code

GENERAL SUBJECT MATTER TO BE CONSIDERED: Probable Cause Panel Meeting

A copy of the agenda may be obtained by contacting: https://floridaschiropracticmedicine.gov.

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 7 days before the workshop/meeting by contacting: 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Gail.Curry@flhealth.gov.

#### DEPARTMENT OF HEALTH

Board of Hearing Aid Specialists

The Board of Hearing Aid Specialists announces a public meeting to which all persons are invited.

DATE AND TIME: May 21, 2021, 9:00 a.m. ET

PLACE: Please join my meeting from your computer or tablet using GoToMeeting at https://global.gotomeeting.com/join/211739085 or by smartphone (Toll Free) 1(866)899-4679 or (571)317-3117 using Access Code: 211-739-085

GENERAL SUBJECT MATTER TO BE CONSIDERED: General board business involving discussion and actions, including, but not limited to general board business, licensure applications, rules and disciplinary matters.

A copy of the agenda may be obtained by contacting the board office at (850)245-4292 or by visiting our website at https://floridashearingaidspecialists.gov/meeting-information/. 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 7 days before the workshop/meeting by contacting the board office at (850)245-4292.

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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact the board office at (850)245-4292.

#### DEPARTMENT OF HEALTH

**Board of Orthotists and Prosthetists** 

The Board of Orthotists and Prosthetists announces a public meeting to which all persons are invited.

DATE AND TIME: August 6, 2021, 9:00 a.m. ET

PLACE: Hilton Garden Inn Orlando SeaWorld, 6850 Westwood Blvd. Orlando, FL 32821. Contact # (407)354-1500 GENERAL SUBJECT MATTER TO BE CONSIDERED: General board business involving discussion and actions, including, but not limited to general board business, licensure applications, rules and disciplinary matters.

A copy of the agenda may be obtained by contacting the board office at (850)245-4292 or by visiting our website at https://floridasorthotistsprosthetists.gov/meeting-information/.

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 7 days before the workshop/meeting by contacting the board office at (850)245-4292.

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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact the board office at (850)245-4292.

#### DEPARTMENT OF HEALTH

Board of Podiatric Medicine

The Board of Podiatric Medicine announces a public meeting to which all persons are invited.

DATE AND TIME: July 9, 2021, 9:00 a.m. ET

PLACE: Hilton Garden Inn Orlando SeaWorld, 6850 Westwood Blvd. Orlando, FL 32821. Contact # (407)354-1500 GENERAL SUBJECT MATTER TO BE CONSIDERED: General board business involving discussion and actions, including, but not limited to general board business, licensure applications, rules and disciplinary matters.

A copy of the agenda may be obtained by contacting the board office at (850)245-4292 or by visiting our website at https://floridaspodiatricmedicine.gov/meeting-information/.

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 7 days before the workshop/meeting by contacting the board office at (850)245-4292.

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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact the board office at (850)245-4292.

#### DEPARTMENT OF HEALTH

Board of Podiatric Medicine

The Board of Podiatric Medicine announces a public meeting to which all persons are invited.

DATE AND TIME: October 1, 2021, 9:00 a.m. ET

PLACE: Hilton Garden Inn Lake Buena Vista/Orlando, 11400 Marbella Palm Court Orlando, FL 32836. Contact # (407)239-9550

GENERAL SUBJECT MATTER TO BE CONSIDERED: General board business involving discussion and actions, including, but not limited to general board business, licensure applications, rules and disciplinary matters.

A copy of the agenda may be obtained by contacting the board office at (850)245-4292 or by visiting our website at https://floridaspodiatricmedicine.gov/meeting-information/.

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 7 days before the workshop/meeting by contacting the board office at (850)245-4292.

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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact the board office at (850)245-4292.

#### DEPARTMENT OF HEALTH

Board of Athletic Training

The Board of Athletic Training announces a public meeting to which all persons are invited.

DATE AND TIME: July 30, 2021, 7:30 a.m. ET

PLACE: Please join my meeting from your computer or tablet using GoToMeeting at https://global.gotomeeting.com/join/940847717 or by smartphone (Toll Free) 1(877)309-2073 or (571)317-3129 using Access Code: 940-847-717

GENERAL SUBJECT MATTER TO BE CONSIDERED: General board business involving discussion and actions, including, but not limited to general board business, licensure applications, rules and disciplinary matters.

A copy of the agenda may be obtained by contacting the board office at (850)245-4292 or by visiting our website at https://floridasathletictraining.gov/meeting-information/.

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 7 days before the workshop/meeting by contacting the board office at (850)245-4292.

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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact the board office at (850)245-4292.

#### DEPARTMENT OF HEALTH

Division of Children's Medical Services

The State Child Abuse Death Review Committee \*\*CANCELLED\*\* announces a telephone conference call to which all persons are invited.

DATE AND TIME: The Teams Meeting scheduled for November 20, 2020 has been cancelled. Meeting originally published: 11/16/2020 Vol. 46/223

PLACE: \*\*\*CANCELLED\*\*\*

GENERAL SUBJECT MATTER TO BE CONSIDERED: \*\*\*CANCELLED\*\*\*

A copy of the agenda may be obtained by contacting: NA

#### DEPARTMENT OF CHILDREN AND FAMILIES

Family Safety and Preservation Program

The Department of Children and Families announces a telephone conference call to which all persons are invited.

DATE AND TIME: December 8, 2020, 2:00 p.m. – 5:00 p.m. PLACE: Please join my meeting from your computer, tablet or smartphone. https://global.gotomeeting.com/join/164792061

You can also dial in using your phone. (For supported devices, tap a one-touch number below to join instantly.) United States (Toll Free): 1(866)899-4679, One-touch: tel: 1(866)899-4679, 164792061#United States: (571)317-3116, One-touch: tel: (571)317-3116, 164792061#Access Code: 164-792-061Join from a video-conferencing room or system. Dial in or type: 67.217.95.2 or inroomlink.goto.com Meeting ID: 164 792 061 Or dial directly: 164792061@67.217.95.2 or 67.217.95.2##164792061

GENERAL SUBJECT MATTER TO BE CONSIDERED: CIRRT Advisory Committee Meeting

A copy of the agenda may be obtained by contacting: Jess Tharpe at Jess.Tharpe@myflfamilies.com or (850)228-4473. 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 2 days before the workshop/meeting by contacting: Lisa Rivera at Lisa.Rivera@myflfamilies.com or (850)294-4765. 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).

#### AFRICAN AMERICAN HISTORY TASK FORCE

The African American History Task Force announces a public meeting to which all persons are invited.

DATE AND TIME: December 5, 2020, 8:00 a.m. – 4:00 p.m. PLACE: Virtual Zoom Meeting-Join Zoom Meeting, https://famu.zoom.us/j/94067746366

GENERAL SUBJECT MATTER TO BE CONSIDERED: Annual meeting and program review.

A copy of the agenda may be obtained by contacting: Dr. Bernadette Kelley, bernadette.kelley@famu.edu.

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 7 days before the workshop/meeting by contacting:

Dr. Bernadette Kelley,

bernadette.kelley@famu.edu. 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).

If any person decides to appeal any decision made by the Board with respect to any matter considered at this meeting or hearing, he/she will need to ensure that a verbatim record of the proceeding is made, which record includes the testimony and evidence from which the appeal is to be issued.

For more information, you may contact: Dr. Bernadette Kelley, bernadette.kelley@famu.edu.

## HARDEE COUNTY ECONOMIC DEVELOPMENT AUTHORITY

The Economic Development Authority announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, December 15, 2020, 8:30 a.m.

PLACE: Hardee County Commission Chambers

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Hardee County Economic Development Authority (Independent Board) will meet on Tuesday, December 15, 2020, 8:30 a.m.

The meeting will be held in the County Commission Chambers, Room 102, 412 West Orange Street, Wauchula, Florida. The Commissioners will be physically present. All CDC guidelines will be adhered to.

The meeting will be livestreamed on the internet and can be viewed at www.hardeeclerk.com by clicking on tab labeled "Clerk to the Board," then "Webcast and Videos of Board Meetings," then choosing the meeting of December 15, 2020, to view. If you wish to submit your comments before the meeting, you will click on meeting date and then you will see box where to click to submit your comment.

For more information, please call 1(863)773-9430, Russell Melendy, Chairman.

A copy of the agenda may be obtained by contacting: Danielle DeLeon at 1(863)773-9430.

## FLORIDA BIRTH-RELATED NEUROLOGICAL INJURY COMPENSATION ASSOCIATION

The Florida Birth-Related Neurological Injury Compensation Association announces a telephone conference call to which all persons are invited.

DATE AND TIME: December 4, 2020, 9:30 a.m.

PLACE: via telephone

GENERAL SUBJECT MATTER TO BE CONSIDERED: Board of Directors Meeting

A copy of the agenda may be obtained by contacting: Minnie Patrick at mpatrick@nica.com.

#### **AECOM**

The Florida Department of Transportation, District One announces a workshop to which all persons are invited.

DATE AND TIME: December 1, 2020 – December 22, 2020 (any time during the 21-day period)

PLACE: Virtual Public Workshop

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Florida Department of Transportation (FDOT), District One, is hosting a Virtual Public Workshop for the US 17/92 (Hinson Avenue) Project Development and Environment (PD&E) Study from South 1st Street to 17th Street in Haines City, Florida (FPID No: 431351-1-22-01). This workshop will be held completely online, on the project website, http://swflroads.com/us17-92/hinsonave/s1stto17th/, with no live component.

The Virtual Public Workshop will extend from Tuesday, December 1, 2020 through Tuesday, December 22, 2020. You may participate in the workshop at any time during the 21-day period. If you are unable to view the materials online, printed packets containing workshop materials will be available at the Lake Eva Community Center (555 Ledwith Ave, Haines City, FL 33884) and Haines City Public Library (111 N. 6th St, Haines City, FL 33884) during regular business hours.

After reviewing the meeting materials, you can submit comments in three ways: through links on the project website, by emailing the FDOT Project Manager at Jennifer.Marshall@dot.state.fl.us, or by mailing your comment to Jennifer Marshall, P.E. at FDOT District One, P.O. Box 1249, Bartow, FL 33831. Please note that comments must be received (or postmarked if mailed) by December 22, 2020. The project team will post a summary of the comments received during the workshop to the project website approximately 30 days following the end of the comment period.

FDOT solicits participation without regard to race, color, national origin, age, sex, religion, disability, or family status. A copy of the agenda may be obtained by contacting: Jennifer Marshall P.E., at 1(863)519-2239, by email to jennifer.marshall@dot.state.fl.us, or by written correspondence to the Florida Department of Transportation, P.O. Box 1249, Bartow, FL 33831-1249.

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 7 days before the workshop/meeting by contacting: Cynthia Sykes, District One Title VI Coordinator, 1(863)519-2287, e-mail cynthia.sykes@dot.state.fl.us. 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).

For more information, you may contact: Jennifer Marshall P.E., at 1(863)519-2239, by email to jennifer.marshall@dot.state.fl.us, or by written correspondence to the Florida Department of Transportation, P.O. Box 1249, Bartow, FL 33831-1249.

#### INFINITE SOURCE COMMUNICATIONS GROUP, LLC

The Florida Department of Transportation District Six announces a public meeting to which all persons are invited. DATE AND TIME: Wednesday, December 9, 2020, 5:30 p.m. -7:30 p.m.

PLACE: GoToWebinar - To participate in this virtual meeting from your computer, tablet or smartphone please click here to register: (Here Link - https://register.gotowebinar.com/register/85071472746315361

Participants can also use their phone by dialing into (631)992-3221, Access code: 856-500-863

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Florida Department of Transportation (FDOT) District Six will hold a Virtual Public Meeting for a roadway improvement project along State Road (SR) 5/Whitehead Street from Fleming Street to Truman Avenue, in Monroe County. The project identification number is 443892-1-52-01. The Virtual Public Meeting will consist of a formal presentation followed by an open discussion. Staff will be available to answer questions in the order they are received and as time permits. If your question is not responded to during the event, a response will be provided in writing following the Virtual Public Meeting.

A copy of the agenda may be obtained by contacting: Community Outreach Specialist, Rodolfo Roman at (786)519-7160, email: Roman@iscprgroup.com.

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 7 days before the workshop/meeting by contacting: Irene Varela at (305)470-5342 or in writing at FDOT, 1000 NW 111 Avenue, Miami, FL 33172 or by email at: Irene.Varela@dot.state.fl.us?. 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). For more information, you may contact: Community Outreach Specialist Rodolfo Roman at (786)519-7160, email: Roman@iscprgroup.com.

# Section VII Notice of Petitions and Dispositions Regarding Declaratory Statements

DEPARTMENT OF CORRECTIONS

RULE NO.: RULE TITLE: 33-602.101 Care of Inmates

NOTICE IS HEREBY GIVEN that the Florida Department of Corrections has issued an order disposing of the petition for declaratory statement filed by inmate Teddy Stokes, DC# P09866, on August 25, 2020. The following is a summary of the agency's disposition of the petition: the Petitioner may only participate in administrative proceedings that are brought pursuant to paragraphs 120.54(3)(c) and (7), Florida Statutes. Pursuant to subsection 120.81(3), Florida Statutes, the Petitioner lacks standing to bring a Petition for Declaratory Statement, and the Department lacks jurisdiction to issue a declaratory statement in this case.

A copy of the Order Disposing of the Petition for Declaratory Statement may be obtained by contacting: A copy of the Final Order and the Petition for Declaratory Statement may be obtained by contacting: Betty Renfroe, 501 South Calhoun Street, Tallahassee, Florida 32399, betty.renfroe@fdc.myflorida.com, (850)717-3605.

# Section VIII Notice of Petitions and Dispositions Regarding the Validity of Rules

Notice of Petition for Administrative Determination has been filed with the Division of Administrative Hearings on the following rules:

#### **NONE**

Notice of Disposition of Petition for Administrative Determination has been filed with the Division of Administrative Hearings on the following rules:

#### **NONE**

# Section IX Notice of Petitions and Dispositions Regarding Non-rule Policy Challenges

#### **NONE**

# Section X Announcements and Objection Reports of the Joint Administrative Procedures Committee

#### **NONE**

### Section XI Notices Regarding Bids, Proposals and Purchasing

#### DEPARTMENT OF EDUCATION

University of Florida Notice of Bid Request for Qualifications (Construction) University of Florida Board of Trustees UF Bid Number ITB21KO-123 UF-640 IFAS Blueberry Research Facility SCOPE OF WORK:

The project consists of the creation of a state-of-the-art facility to carry out blueberry breeding, research, extension, and instruction in the United States. This facility will not only aid in developing cultivars faster to help Florida producers, but will enhance UF's status as a leader in blueberry breeding and research. It will be a single story, roughly 9,800 GSF facility dedicated to blueberry research. It will contain molecular, tissue, culture, and fruit quality laboratories, as well as instructional rooms for lectures and the needed support space for the facility to be fully self-contained.

Applicants unfamiliar with work at the University of Florida (UF) are strongly urged to familiarize themselves with the UF General Terms and Conditions, construction inspection & closeout procedures and forms, and other documents and materials available on the UF Planning Design & Construction (PD&C) website at www.facilities.ufl.edu.

#### PROPOSAL:

The method of delivery is design-bid-build, with an enhanced pre-bid qualification process. The following criteria shall be used to qualify potential bidders:

- 1. AIA Document A305
- 2. Past Performance on Similar Projects
- 3. Personnel Assigned to the Project
- 4. Financial Standing, Qualifications and Licensure
- 5. Safety Information
- 6. Workload Information

Only applicants deemed to be qualified will be permitted to bid. RFQ inquiries are due December 1, 2020, 5:00 p.m. RFQ submittals are due December 11, 2020, 3:00 p.m.

To retrieve the Request for Qualifications (RFQ) instructions, forms, and additional information, go to the UF Procurement Services "Schedule of Bids" website: https://procurement.ufl.edu/vendors/schedule-of-bids/.

### Section XII Miscellaneous

#### DEPARTMENT OF STATE

Index of Administrative Rules Filed with the Secretary of State Pursuant to subparagraph 120.55(1)(b)6. – 7., F.S., the below list of rules were filed in the Office of the Secretary of State between 3:00 p.m., Friday, November 13, 2020 and 3:00 p.m., Thursday, November 19, 2020.

Rule No.	File Date	Effective Date
12D-16.002	11/17/2020	12/7/2020
40E-7.668	11/19/2020	12/9/2020
40E-7.669	11/19/2020	12/9/2020
40E-7.670	11/19/2020	12/9/2020
40E-7.672	11/19/2020	12/9/2020
40E-7.673	11/19/2020	12/9/2020
40E-7.674	11/19/2020	12/9/2020
40E-7.675	11/19/2020	12/9/2020
40E-7.676	11/19/2020	12/9/2020
40E-7.677	11/19/2020	12/9/2020
40E-7.678	11/19/2020	12/9/2020
61-35.025	11/17/2020	12/7/2020
61G1-12.005	11/16/2020	12/6/2020
61G1-16.004	11/19/2020	12/9/2020
61G1-21.001	11/19/2020	12/9/2020
61G1-21.006	11/19/2020	12/9/2020
61G2-7.030	11/13/2020	12/3/2020
61J2-10.032	11/18/2020	12/8/2020
61J2-10.038	11/18/2020	12/8/2020
64B-4.003	11/18/2020	12/8/2020
64B2-16.007	11/13/2020	12/3/2020

64ER20-35	11/16/2020	11/16/2020
64ER20-36	11/16/2020	11/16/2020
64ER20-37	11/16/2020	11/16/2020
64ER20-38	11/17/2020	11/17/2020
64ER20-39	11/17/2020	11/17/2020
64BER20-40	11/18/2020	12/1/2020
65C-16.021	11/17/2020	12/7/2020
68A-12.010	11/13/2020	12/3/2020
68A-12.011	11/13/2020	12/3/2020
TAGE OF DAY EG ATTA TENTO		

# LIST OF RULES AWAITING EPA APPROVAL PURSUANT TO SECTION 373.4146 (2), FLORIDA STATUTES Rule No. File Date Effecti

Rule No.	File Date	Effective Date
62-330.010	7/21/2020	**/**/***
62-330.050	6/26/2020	**/**/***
62-330.060	6/26/2020	**/**/***
62-330.090	6/26/2020	**/**/***
62-330.201	6/26/2020	**/**/***
62-330.340	6/26/2020	**/**/***
62-330.402	6/26/2020	**/**/***
62-331.010	7/21/2020	**/**/***
62-331.020	6/11/2020	**/**/***
62-331.030	6/11/2020	**/**/***
62-331.040	6/11/2020	**/**/***
62-331.050	6/11/2020	**/**/***
62-331.051	7/21/2020	**/**/***
62-331.052	7/21/2020	**/**/***
62-331.053	7/21/2020	**/**/***
62-331.054	7/21/2020	**/**/***
62-331.060	7/21/2020	**/**/***
62-331.070	6/11/2020	**/**/***
62-331.080	7/21/2020	**/**/***
62-331.090	7/21/2020	**/**/***

62-331.110         7/21/2020         **/**/****           62-331.120         7/21/2020         ***/**/****           62-331.130         6/11/2020         ***/**/****           62-331.140         6/11/2020         **/**/*****           62-331.160         7/21/2020         ***/**/*****           62-331.200         7/21/2020         ***/**/*****           62-331.211         6/11/2020         ***/**/*****           62-331.212         6/11/2020         ***/**/*****           62-331.213         6/11/2020         ***/**/*****           62-331.214         6/11/2020         ***/**/*****           62-331.215         7/21/2020         ***/**/*****           62-331.216         7/21/2020         ***/**/*****           62-331.217         7/21/2020         ***/**/*****           62-331.218         6/11/2020         ***/**/*****           62-331.219         6/11/2020         ***/**/*****           62-331.221         6/11/2020         ***/**/*****           62-331.221         6/11/2020         ***/**/*****           62-331.221         6/11/2020         ***/**/*****           62-331.223         6/11/2020         ***/**/*****           62-331.224         6/11/2020         <	62-331.100	6/11/2020	**/**/***
62-331.130 6/11/2020 **/**/**** 62-331.140 6/11/2020 **/**/**** 62-331.160 7/21/2020 **/**/**** 62-331.200 7/21/2020 **/**/**** 62-331.201 7/21/2020 **/**/**** 62-331.211 6/11/2020 **/**/**** 62-331.212 6/11/2020 **/**/**** 62-331.213 6/11/2020 **/**/**** 62-331.214 6/11/2020 **/**/**** 62-331.215 7/21/2020 **/**/**** 62-331.216 7/21/2020 **/**/**** 62-331.217 7/21/2020 **/**/**** 62-331.218 6/11/2020 **/**/**** 62-331.219 6/11/2020 **/**/**** 62-331.219 6/11/2020 **/**/**** 62-331.220 6/11/2020 **/**/**** 62-331.221 6/11/2020 **/**/**** 62-331.222 6/11/2020 **/**/**** 62-331.223 6/11/2020 **/**/**** 62-331.224 6/11/2020 **/**/**** 62-331.225 7/21/2020 **/**/**** 62-331.226 6/11/2020 **/**/**** 62-331.227 6/11/2020 **/**/**** 62-331.228 6/11/2020 **/**/**** 62-331.228 6/11/2020 **/**/**** 62-331.229 7/21/2020 **/**/**** 62-331.231 7/21/2020 **/**/**** 62-331.233 6/11/2020 **/**/*****	62-331.110	7/21/2020	**/**/***
62-331.140 6/11/2020 **/**/**** 62-331.160 7/21/2020 **/**/**** 62-331.200 7/21/2020 **/**/**** 62-331.201 7/21/2020 **/**/**** 62-331.210 7/21/2020 **/**/**** 62-331.211 6/11/2020 **/**/**** 62-331.212 6/11/2020 **/**/**** 62-331.213 6/11/2020 **/**/**** 62-331.214 6/11/2020 **/**/**** 62-331.215 7/21/2020 **/**/***** 62-331.216 7/21/2020 **/**/***** 62-331.217 7/21/2020 **/**/***** 62-331.218 6/11/2020 **/**/***** 62-331.219 6/11/2020 **/**/***** 62-331.219 6/11/2020 **/**/***** 62-331.220 6/11/2020 **/**/***** 62-331.221 6/11/2020 **/**/***** 62-331.222 6/11/2020 **/**/***** 62-331.223 6/11/2020 **/**/***** 62-331.224 6/11/2020 **/**/***** 62-331.225 7/21/2020 **/**/***** 62-331.226 7/21/2020 **/**/***** 62-331.227 6/11/2020 **/**/***** 62-331.228 6/11/2020 **/**/***** 62-331.229 7/21/2020 **/**/***** 62-331.229 7/21/2020 **/**/***** 62-331.231 7/21/2020 **/**/***** 62-331.231 7/21/2020 **/**/***** 62-331.231 7/21/2020 **/**/***** 62-331.231 7/21/2020 **/**/*****	62-331.120	7/21/2020	**/**/***
62-331.210 7/21/2020 **/**/**** 62-331.210 7/21/2020 **/**/**** 62-331.211 6/11/2020 **/**/**** 62-331.212 6/11/2020 **/**/**** 62-331.213 6/11/2020 **/**/**** 62-331.214 6/11/2020 **/**/**** 62-331.215 7/21/2020 **/**/**** 62-331.216 7/21/2020 **/**/**** 62-331.217 7/21/2020 **/**/**** 62-331.218 6/11/2020 **/**/**** 62-331.219 6/11/2020 **/**/**** 62-331.219 6/11/2020 **/**/**** 62-331.210 6/11/2020 **/**/**** 62-331.210 6/11/2020 **/**/**** 62-331.210 6/11/2020 **/**/**** 62-331.210 6/11/2020 **/**/**** 62-331.210 6/11/2020 **/**/**** 62-331.221 6/11/2020 **/**/**** 62-331.221 6/11/2020 **/**/**** 62-331.222 6/11/2020 **/**/***** 62-331.223 6/11/2020 **/**/***** 62-331.224 6/11/2020 **/**/***** 62-331.225 7/21/2020 **/**/***** 62-331.226 6/11/2020 **/**/***** 62-331.227 6/11/2020 **/**/***** 62-331.228 6/11/2020 **/**/***** 62-331.229 7/21/2020 **/**/***** 62-331.231 7/21/2020 **/**/***** 62-331.231 7/21/2020 **/**/***** 62-331.231 7/21/2020 **/**/***** 62-331.233 6/11/2020 **/**/*****	62-331.130	6/11/2020	**/**/***
62-331.200         7/21/2020         **/**/****           62-331.201         7/21/2020         **/**/****           62-331.210         7/21/2020         **/**/****           62-331.211         6/11/2020         **/**/****           62-331.212         6/11/2020         **/**/****           62-331.213         6/11/2020         **/**/****           62-331.214         6/11/2020         **/**/****           62-331.215         7/21/2020         **/**/****           62-331.216         7/21/2020         **/**/*****           62-331.217         7/21/2020         **/**/*****           62-331.218         6/11/2020         **/**/*****           62-331.219         6/11/2020         **/**/*****           62-331.220         6/11/2020         **/**/*****           62-331.221         6/11/2020         **/**/*****           62-331.222         6/11/2020         **/**/*****           62-331.223         6/11/2020         **/**/*****           62-331.224         6/11/2020         **/**/*****           62-331.225         7/21/2020         **/**/*****           62-331.226         7/21/2020         **/**/*****           62-331.228         6/11/2020         **/**/*****	62-331.140	6/11/2020	**/**/***
62-331.201         7/21/2020         **/**/****           62-331.210         7/21/2020         **/**/*****           62-331.211         6/11/2020         **/**/*****           62-331.212         6/11/2020         **/**/*****           62-331.213         6/11/2020         **/**/*****           62-331.214         6/11/2020         **/**/*****           62-331.215         7/21/2020         **/**/*****           62-331.216         7/21/2020         **/**/*****           62-331.217         7/21/2020         **/**/*****           62-331.218         6/11/2020         **/**/*****           62-331.219         6/11/2020         **/**/*****           62-331.220         6/11/2020         **/**/*****           62-331.221         6/11/2020         **/**/*****           62-331.222         6/11/2020         **/**/*****           62-331.223         6/11/2020         **/**/*****           62-331.224         6/11/2020         **/**/*****           62-331.225         7/21/2020         **/**/*****           62-331.226         7/21/2020         **/**/*****           62-331.228         6/11/2020         **/**/*****           62-331.230         7/21/2020         **/**/******	62-331.160	7/21/2020	**/**/***
62-331.210         7/21/2020         **/**/****           62-331.211         6/11/2020         **/**/****           62-331.212         6/11/2020         **/**/****           62-331.213         6/11/2020         **/**/****           62-331.214         6/11/2020         **/**/*****           62-331.215         7/21/2020         **/**/*****           62-331.216         7/21/2020         **/**/*****           62-331.217         7/21/2020         **/**/*****           62-331.218         6/11/2020         **/**/*****           62-331.219         6/11/2020         **/**/*****           62-331.220         6/11/2020         **/**/*****           62-331.221         6/11/2020         **/**/*****           62-331.222         6/11/2020         **/**/*****           62-331.223         6/11/2020         **/**/*****           62-331.224         6/11/2020         **/**/*****           62-331.225         7/21/2020         **/**/*****           62-331.226         7/21/2020         **/**/*****           62-331.228         6/11/2020         **/**/*****           62-331.230         7/21/2020         **/**/*****           62-331.231         7/21/2020         **/**/***** <td>62-331.200</td> <td>7/21/2020</td> <td>**/**/***</td>	62-331.200	7/21/2020	**/**/***
62-331.211       6/11/2020       **/**/****         62-331.212       6/11/2020       **/**/****         62-331.213       6/11/2020       **/**/*****         62-331.214       6/11/2020       **/**/*****         62-331.215       7/21/2020       **/**/*****         62-331.216       7/21/2020       **/**/*****         62-331.217       7/21/2020       **/**/*****         62-331.218       6/11/2020       **/**/*****         62-331.219       6/11/2020       **/**/*****         62-331.220       6/11/2020       **/**/*****         62-331.221       6/11/2020       **/**/*****         62-331.222       6/11/2020       **/**/*****         62-331.223       6/11/2020       **/**/*****         62-331.224       6/11/2020       **/**/*****         62-331.225       7/21/2020       **/**/*****         62-331.226       7/21/2020       **/**/*****         62-331.228       6/11/2020       **/**/*****         62-331.230       7/21/2020       **/**/*****         62-331.231       7/21/2020       **/**/*****         62-331.233       6/11/2020       **/**/*****	62-331.201	7/21/2020	**/**/***
62-331.212	62-331.210	7/21/2020	**/**/***
62-331.213	62-331.211	6/11/2020	**/**/***
62-331.214       6/11/2020       **/**/****         62-331.215       7/21/2020       **/**/****         62-331.216       7/21/2020       **/**/****         62-331.217       7/21/2020       **/**/****         62-331.218       6/11/2020       **/**/****         62-331.219       6/11/2020       **/**/****         62-331.220       6/11/2020       **/**/****         62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.212	6/11/2020	**/**/***
62-331.215       7/21/2020       **/**/****         62-331.216       7/21/2020       **/**/****         62-331.217       7/21/2020       **/**/****         62-331.218       6/11/2020       **/**/****         62-331.219       6/11/2020       **/**/****         62-331.220       6/11/2020       **/**/****         62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.213	6/11/2020	**/**/***
62-331.216       7/21/2020       **/**/****         62-331.217       7/21/2020       **/**/****         62-331.218       6/11/2020       **/**/****         62-331.219       6/11/2020       **/**/****         62-331.220       6/11/2020       **/**/****         62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.214	6/11/2020	**/**/***
62-331.217       7/21/2020       **/**/****         62-331.218       6/11/2020       **/**/****         62-331.219       6/11/2020       **/**/****         62-331.220       6/11/2020       **/**/****         62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.215	7/21/2020	**/**/***
62-331.218       6/11/2020       **/**/****         62-331.219       6/11/2020       **/**/****         62-331.220       6/11/2020       **/**/****         62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.216	7/21/2020	**/**/***
62-331.219       6/11/2020       **/**/****         62-331.220       6/11/2020       **/**/****         62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.217	7/21/2020	**/**/***
62-331.220       6/11/2020       **/**/****         62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.218	6/11/2020	**/**/***
62-331.221       6/11/2020       **/**/****         62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.219	6/11/2020	**/**/***
62-331.222       6/11/2020       **/**/****         62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.220	6/11/2020	**/**/***
62-331.223       6/11/2020       **/**/****         62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.221	6/11/2020	**/**/***
62-331.224       6/11/2020       **/**/****         62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.222	6/11/2020	**/**/***
62-331.225       7/21/2020       **/**/****         62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.223	6/11/2020	**/**/***
62-331.226       7/21/2020       **/**/****         62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.224	6/11/2020	**/**/***
62-331.227       6/11/2020       **/**/****         62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.225	7/21/2020	**/**/***
62-331.228       6/11/2020       **/**/****         62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.226	7/21/2020	**/**/***
62-331.229       7/21/2020       **/**/****         62-331.230       7/21/2020       **/**/****         62-331.231       7/21/2020       **/**/****         62-331.233       6/11/2020       **/**/****	62-331.227	6/11/2020	**/**/***
62-331.230 7/21/2020 **/**/**** 62-331.231 7/21/2020 **/**/**** 62-331.233 6/11/2020 **/**/****	62-331.228	6/11/2020	**/**/***
62-331.231	62-331.229	7/21/2020	**/**/***
62-331.233 6/11/2020 **/**/***	62-331.230	7/21/2020	**/**/***
0.7 17.2020	62-331.231	7/21/2020	**/**/***
62-331.234 6/11/2020 **/**/***	62-331.233	6/11/2020	**/**/***
	62-331.234	6/11/2020	**/**/***

62-331.235	6/11/2020	**/**/***
62-331.236	6/11/2020	**/**/***
62-331.237	6/11/2020	**/**/***
62-331.238	6/11/2020	**/**/***
62-331.239	6/11/2020	**/**/***
62-331.240	7/21/2020	**/**/***
62-331.241	6/11/2020	**/**/***
62-331.242	7/21/2020	**/**/***
62-331.243	6/11/2020	**/**/***
62-331.244	6/11/2020	**/**/***
62-331.245	6/11/2020	**/**/***
62-331.246	6/11/2020	**/**/***
62-331.247	6/11/2020	**/**/***
62-331.248	7/21/2020	**/**/***
T TOTAL OF DIT	E E C. A TYLA TERMINA E E C	TOT A PRINTED

#### LIST OF RULES AWAITING LEGISLATIVE APPROVAL SECTIONS 120.541(3), 373.139(7) AND/OR 373.1391(6), FLORIDA STATUTES

Rule No.	File Date	Effective Date
60FF1-5.009	7/21/2016	**/**/***
60P-1.003	11/5/2019	**/**/***
60P-2.002	11/5/2019	**/**/***
60P-2.003	11/5/2019	**/**/***
64B8-10.003	12/9/2015	**/**/***

### Section XIII Index to Rules Filed During Preceding Week

NOTE: The above section will be published on Tuesday beginning October 2, 2012, unless Monday is a holiday, then it will be published on Wednesday of that week.