

Section I
**Notice of Development of Proposed Rules
 and Negotiated Rulemaking**

DEPARTMENT OF ENVIRONMENTAL PROTECTION

RULE NOS.: RULE TITLES:
 62-210.300 Permits Required
 62-210.310 Air General Permits
 62-210.360 Administrative Permit Corrections and
 Amendments

PURPOSE AND EFFECT: The purpose of this Notice of Rule Development (NORD) is to revise Chapter 62-210, F.A.C., to provide a permit exemption for Source-Separated Organics Processing facilities, revise existing exemptions for boilers to align with federal regulations, delete the Air General Permit for Ethylene Oxide (EtO) Sterilizers, and modify Rule 62-210.360, F.A.C., to allow for operating permits, including Title V operating permits, to be administratively corrected to incorporate air construction permits that meet certain procedural requirements. Deletion of the Air General Permit for EtO sterilizers would subject EtO sterilizers to facility-specific permitting requirements. EtO sterilizers would be required to obtain facility-specific air construction permits and air operation permits, which would detail the applicable emissions limits, emissions control technologies, and monitoring and reporting requirements.

SUBJECT AREA TO BE ADDRESSED: The proposed rule amendments address Stationary Sources – General Requirements.

RULEMAKING AUTHORITY: 403.061, F.S.

LAW IMPLEMENTED: 403.031, 403.061, 403.087, 403.0872, 403.814, F.S.

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:
 Elizabeth Rogers, Florida Department of Environmental Protection, Division of Air Resource Management, 2600 Blair Stone Road, MS 5500, Tallahassee, Florida, 32399-2400.
 Telephone: (850)717-9019. E-mail:
 Elizabeth.Rogers@Floridadep.gov **THE PRELIMINARY TEXT OF THE PROPOSED RULE DEVELOPMENT IS NOT AVAILABLE.**

Section II
Proposed Rules

DEPARTMENT OF CHILDREN AND FAMILIES

Mental Health Program

RULE NOS.: RULE TITLES:
 65E-14.001 Applicability
 65E-14.021 Schedule of Covered Services

PURPOSE AND EFFECT: Amending to add covered community substance abuse and mental health services.

SUMMARY: The amendments accomplish the following: 1) Adds a definition for “plan of care” and increases the value of equipment; 2) Adds Care Coordination, Community Action Treatment (CAT), HIV Early Intervention Services, Respite Services Level II, and Room and Board with Supervision Level IV as covered services; and 3) Provides description, program, measurement standard, and data elements for new covered services.

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.

A SERC has not been prepared.

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 Department used a checklist to conduct an economic analysis and determine if there is an adverse impact or regulatory costs associated with this rule that exceeds the criteria in section 120.541(2)(a), F.S. Based upon this analysis, the Department has determined that the proposed rule is not expected to require legislative ratification.

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: 394.74, 394.78(1), (5), 394.9082(3), 397.321(5), 402.73

LAW IMPLEMENTED: 394.74, 394.74(2)(b), (3)(d), (e), (4), 394.77, 394.78(1), (5), 394.9082, 397.321(10), 397.481, 402.73(1)

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: Elizabeth Floyd. Elizabeth can be reached at Elizabeth.Floyd@myflfamilies.com.

THE FULL TEXT OF THE PROPOSED RULE IS:

65E-14.001 Applicability.

(1) This chapter applies to all Substance Abuse and Mental Health (SAMH)-Funded Entities as defined in paragraph ~~(2)(s)~~ ~~(2)(t)~~, of this rule, when providing services using community substance abuse and mental health funds appropriated by the Legislature to the Department of Children and Families (Department) through the Community Substance Abuse and Mental Health Services budget entity.

(2) Definitions.

(a) through (c) No change.

(d) “Audit” means a single or program-specific audit in accordance with 2 C.F.R. §§200.0-521, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, (January 1, 2014), <http://www.flrules.org/Gateway/reference.asp?No=Ref-06630>, herein incorporated by reference, as specified in subsection 65E-14.003(1), F.A.C., and Section 215.97, F.S. ~~Copies of this incorporated document may be obtained from the Office of Substance Abuse and Mental Health, 1317 Winewood Blvd., Building 6, Tallahassee, Florida 32399-0700, and are also available at <https://www.federalregister.gov/a/2013-30465>.~~

(e) through (f) No change.

(g) “Equipment” means fixtures and other tangible personal property of a non-consumable ~~noneconsumable~~ and nonexpendable nature, the value of which is \$5,000 ~~\$1,000~~ or more; and hardback-covered bound books that are circulated to students or the general public, the value or cost of which is \$25 or more, and hardback-covered bound books, the value or cost of which is \$250 or more; ~~and. For the purposes of this chapter, “equipment” also includes~~ intangible data processing applications and/or computer software, regardless of its value. The value of donated equipment shall be based upon the item’s market value at the time of donation.

(h) through (l) No change.

(m) “Plan of care” means a plan developed by the service provider and the person served which delineates goals for the person served and the services to be provided to meet those goals. This includes, but is not limited to, recovery plans, service plans, treatment plans, and case management plans.

(m) through (r) are redesignated (n) through (s)

(t)(s) “Second Party Payer” or “Responsible Party” means any person legally responsible for the financial support of the individual receiving services, and may include parents of a

minor, ~~individual~~; a spouse, ~~regardless of the age of either party~~; a guardian; representative payee or trustee in a fiduciary capacity for handling benefit payments, trusts and estates established or received for the financial support of the individual served.

~~(u)(t) “Service Provider” means any agency or entity, as defined in Section 394.455(44) or 397.311(42), F.S., providing substance abuse or mental health services, programs or activities.~~

(u) through (x) are redesignated (v) through (y) Rulemaking Authority 394.74, 394.78(1), 394.9082(3), 397.321(5) FS. Law Implemented 394.74, 394.77, 394.9082, 397.481 FS. History—New 2-23-83, Amended 2-25-85, Formerly 10E-14.01, Amended 7-29-96, Formerly 10E-14.001, Amended 7-1-03, 12-14-03, 1-2-05, 7-27-14, 4-27-16. Amended _____.

65E-14.021 Schedule of Covered Services.

This rule provides guidelines and requirements applicable to service providers under direct contract with the Department ~~department~~ or service providers under subcontracts with a Managing Entity.

(1) Unless specifically authorized otherwise in advance by the Department ~~department~~, service providers shall only use the following Substance Abuse and Mental Health (SAMH) Covered Services to report contracted or subcontracted substance abuse and mental health services ~~provided to adults or children.~~

- (a) Aftercare;;
- (b) Assessment;;
- (c) Care Coordination,
- ~~(d)(e)~~ Case Management;;
- (e) Community Action Treatment (CAT),
- ~~(f)(d)~~ Comprehensive Community Service Team;;
- ~~(g)(e)~~ Crisis Stabilization;;
- ~~(h)(f)~~ Crisis Support/Emergency;;
- ~~(i)(g)~~ Day Care;;
- ~~(j)(h)~~ Day Treatment;;
- ~~(k)(i)~~ Drop-In/Self Help Centers;;
- ~~(l)(j)~~ Florida Assertive Community Treatment (FACT) Team;;
- (m) HIV Early Intervention Services,
- ~~(n)(k)~~ Incidental Expenses;;
- ~~(o)(l)~~ Information and Referral;;
- ~~(p)(m)~~ In-Home and Onsite;;
- ~~(q)(n)~~ Inpatient;;
- ~~(r)(o)~~ Intensive Case Management;;
- ~~(s)(p)~~ Intervention;;
- ~~(t)(q)~~ Medical Services;;
- ~~(u)(r)~~ Medication-Assisted Treatment;;
- ~~(v)(s)~~ Mental Health Clubhouse Services;;
- ~~(w)(t)~~ Outpatient;;

- ~~(x)(u)~~ Outreach;_;
 - ~~(y)(v)~~ Prevention – Indicated;_;
 - ~~(z)(w)~~ Prevention – Selective;_;
 - ~~(aa)(x)~~ Prevention – Universal Direct;_;
 - ~~(bb)(y)~~ Prevention – Universal Indirect;_;
 - ~~(cc)(z)~~ Recovery Support;_;
 - ~~(dd)(aa)~~ Residential Level I;_;
 - ~~(ee)(bb)~~ Residential Level II;_;
 - ~~(ff)(cc)~~ Residential Level III;_;
 - (gg) Residential Level IV.
 - ~~(hh)(ee)~~ Respite Services;_;
 - (ii) Respite Services Level II.
 - ~~(jj)(ff)~~ Room and Board with Supervision Level I;_;
 - ~~(kk)(gg)~~ Room and Board with Supervision Level II;_;
 - ~~(ll)(hh)~~ Room and Board with Supervision Level III;_;
 - (mm) Room and Board with Supervision Level IV.
 - ~~(nn)(ii)~~ Short-term Residential Treatment;_;
 - ~~(oo)(jj)~~ Substance Abuse Inpatient Detoxification;_;
 - ~~(pp)(kk)~~ Substance Abuse Outpatient Detoxification;_;
 - ~~(qq)(ll)~~ Supported Employment;_;
 - ~~(rr)(mm)~~ Supportive Housing/Living;_;
 - ~~(ss)(nn)~~ Treatment Alternatives for Safer Communities (TASC);_; and;
 - ~~(tt)(oo)~~ Any other SAMH Covered Services the department may establish pursuant to subsection (2), of this rule, to ensure adequate provision of service.
- (2) No change.
- (3) Measurement Standards for Covered Services.
- (a) To account for services provided pursuant to contracts with SAMH-Funded Entities, the following common measurement definitions shall apply to each SAMH Covered Service as specified in subsection (4), of this rule:
1. Direct Staff Hour.
 - a. through b. No change.
 - c. Covered Services that are measured by this standard shall be reported on the basis of utilization, except for the following SAMH Covered Services, which shall be paid on the basis of availability.
 - (I) Paragraph (4)(~~h~~)(~~f~~), Crisis Support/Emergency,
 - (II) Paragraph (4)(~~o~~)(~~t~~), Information and Referral, and;
 - (III) Paragraph (4)(~~pp~~)(~~kk~~), Substance Abuse Outpatient Detoxification.
 2. No change.
 3. Day.
 - a. No change.
 - b. Covered Services that are measured by this standard shall be reported on the basis of utilization, except for the following:
 - (I) Paragraph (4)(~~g~~)(~~e~~), Crisis Stabilization,
 - (II) Paragraph (4)(~~nn~~)(~~ii~~), Short-term Residential Treatment;_; and;

- (III) Paragraph (4)(~~oo~~)(~~jj~~), Substance Abuse Inpatient Detoxification.
 4. No change.
 - (b) through (c) No change.
 - (d) Definition of Hour.
 1. through 2. No change.
 3. For the Case Management Covered Service defined in paragraph (4)(~~d~~)(~~e~~), of this rule, if the time interval required by Medicaid is different than described above, a service provider may use the Medicaid time interval instead.
 - (e) No change.
 - (4) The descriptions, applicable programs, measurements standards, and data elements for SAMH Covered Services are as follows:
 - (a) Aftercare.
 1. Description – Aftercare activities occur after a treatment level of care is completed and include activities such as supportive counseling, life skills training, and relapse prevention for individuals with individual participation in daily activity functions that were adversely affected by mental illness or substance use disorders to assist in their ongoing recovery. abuse impairments. Relapse prevention issues are important in assisting the individual's recognition of triggers and warning signs of regression. Aftercare services help individuals, families, and pro-social support systems reinforce a healthy living environment.
 2. through 4. No change.
 - (b) Assessment.
 1. Description – This Covered Service includes the systematic collection and integrated review of individual-specific data, such as examinations and evaluations. This data is gathered, analyzed, monitored and documented to develop the person's individualized plan of care treatment and to monitor recovery. Assessment specifically includes efforts to identify the person's key medical and psychological needs, competency to consent to treatment, history of mental illness or substance use and indicators of co-occurring conditions, as well as clinically significant neurological deficits, traumatic brain injury, organicity, physical disability, developmental disability, need for assistive devices, ~~and~~ physical or sexual abuse, ~~and~~ or trauma.
 2. through 4. No change.
 - (c) Care Coordination.
 1. Description – Care Coordination is a time-limited service that assists individuals with behavioral health conditions who are not effectively engaged with case management or other behavioral health services and supports for a successful transition to appropriate levels of care. Once engagement in the necessary community-based services is verified, care coordination services are terminated.

2. Programs – Community Mental Health and Community Substance Abuse.

3. Measurement Standard – Direct Staff Hour, as defined in sub-sub-subparagraph (3)(a)1. of this rule.

4. Data Elements:

a. Service Documentation – Activity Log:

(I) Covered Service,

(II) Staff name and identification number,

(III) Recipient name and identification number,

(IV) Service date,

(V) Duration,

(VI) Service (specify), and

(VII) Program.

b. Audit Documentation – Recipient Service Chart:

(I) Recipient name and identification number,

(II) Staff name and identification number,

(III) Service date,

(IV) Duration, and

(V) Service (specify).

(d)(e) No Change.

(e) Community Action Treatment (CAT).

1. Description – This Covered Service, pursuant to section 394.495, F.S., provides community-based services to children ages 11 to 21 with a mental health disorder (including those with a co-occurring substance use diagnosis) who meet certain accompanying eligibility criteria identified by the statute. Children younger than 11 may be served if they display two or more of the aforementioned eligibility criteria. The team is available on nights, weekends, and holidays. Allowable services may include one or any combination of the following activities:

a. Aftercare,

b. Assessment,

c. Care Coordination,

d. Case Management,

e. Crisis Support / Emergency,

f. Information and Referral,

g. In-Home and On-Site Services,

h. Intensive Case Management,

i. Intervention – Individual and Group,

j. Medical Services,

k. Outpatient – Individual and Group,

l. Outreach,

m. Recovery Support – Individual and Group,

n. Supported Employment, and

o. Supported Housing / Living.

2. Programs – Community Mental Health.

3. Measurement Standard: Direct Staff Hour, as defined in sub-sub-subparagraph (3)(a)1., of this rule.

4. Data Elements:

a. Service Documentation – Activity Log:

(I) Staff name and identification number,

(II) Recipient name and identification number,

(III) Service date,

(IV) Duration,

(V) Service (specify), and

(VI) Program.

b. Audit Documentation – Recipient Service Chart:

(I) Recipient name and identification number,

(II) Staff name and identification number,

(III) Service date,

(IV) Duration, and

(V) Service (specify).

(f)(d) Comprehensive Community Service Team.

1. Description – This Covered Service is a bundled service package designed to provide short-term assistance and guide individuals to rebuild ~~in rebuilding~~ skills in identified roles in their environment through the engagement of natural supports, treatment services, and assistance of multiple agencies when indicated. Services provided under Comprehensive Community Service Teams may not be simultaneously reported to another Covered Service. Allowable bundled activities include the following Covered Services as defined in subsection (4), of this rule:

a. through b. No change.

c. Care Coordination,

c. through m. are redesignated d. through n.

2. through 4. No change.

(g)(e) No change.

(h)(f) Crisis Support/Emergency.

1. Description – This non-residential care is generally available twenty-four hours per day, seven days per week, or some other specific time period, to intervene in a crisis or provide emergency care. Examples include: ~~mobile crisis, crisis support,~~ crisis/emergency screening, mobile response, ~~crisis telephone~~ or telehealth crisis support, and emergency walk-in walk-in.

2. through 4. No change.

(i)(g) Day Care.

1. Description – Day care services, in a non-residential group setting, provide for the care of children of persons who are participating in mental health or substance use treatment ~~abuse~~ services. In a residential setting, day care services provide for the residential and care-related costs of a child living with a parent receiving residential services. This covered service must be provided in conjunction with another Covered Service provided to a person 18 years of age or older.

2. through 4. No change.

(j)(h) Day Treatment.

1. Description – Day Treatment services provide a structured schedule of non-residential interventions services for four or more consecutive hours per day. Activities for children and adult mental health programs are designed to assist individuals to attain skills and behaviors needed to function successfully in living, learning, work, and social environments. Activities for substance abuse programs emphasize rehabilitation, treatment, activities of daily living, and education services, using multidisciplinary teams to provide integrated programs of academic, therapeutic, and family services. For mental health programs, day treatment services must be provided for four or more consecutive hours per day. Substance abuse programs must follow the standards set forth in Rules 65D-30.0081 and 65D-30.009, F.A.C.

2. through 4. No change.

~~(k)(4)~~ Drop-in/Self-Help Centers.

1. Description – These community centers, such as drop-in centers or recovery community organizations, are intended to provide a range of opportunities for persons with or a history of mental health and substance use conditions severe and persistent mental illness to independently develop, operate, and participate in social, recreational, self-help, harm reduction, and networking activities. This covered service may not be provided to a person less than 18 years old.

2. Programs – Community Mental Health and Community Substance Abuse.

3. through 4. No change.

~~(l)(4)~~ Florida Assertive Community Treatment (FACT) Team.

1. Description – A FACT team is comprised of slots for participants with a serious severe and persistent mental illness. Participants are enrolled on a weekly basis. For a provider to identify themselves as a FACT team, the provider must demonstrate adherence to assertive community treatment principles. FACT Teams provide non-residential services that are available twenty-four hours per day, seven days per week. Rehabilitative, support and therapeutic services are provided in the community, by a multidisciplinary team. This covered service may not be provided to a person less than 18 years old.

2. No change.

3. Measurement Standard – The total value of a service provider’s FACT team contract divided by the number of contracted slots establishing the annual cost per participant. The annual cost per participant may be divided by 365 days per year to establish the daily enrollment cost. ~~Number of Enrolled Participants, notwithstanding the requirements of paragraph (3)(a), of this rule.~~

4. Data Elements:

a. Enrollment Documentation:

(I) Date and ~~weekly~~ number of enrolled participants,

(II) through (IV) No change.

b. No change.

~~5. Reimbursement for this Covered Service shall be based upon weekly enrollment costs according to the following formula:~~

~~a. The total value of a service provider’s FACT team contract shall be divided by the contracted number of slots to establish the annual cost per participant.~~

~~b. The annual cost per participant shall be divided by 52 weeks per year to establish the weekly enrollment cost.~~

~~(m) HIV Early Intervention Services.~~

1. Description - This Covered Service is a bundled service package to provide Human Immunodeficiency Virus (HIV) Early Intervention Services in accordance with 65D-30.004, F.A.C. Allowable HIV Early Intervention Services may include one or any combination of the following activities:

a. Pretest counseling,

b. Posttest counseling,

c. Tests to confirm the presence of HIV,

d. Tests to diagnose the extent of the deficiency in the immune system,

e. Tests to provide information on appropriate therapeutic measures for preventing and treating the deterioration of the immune system and conditions arising from HIV, including tests for hepatitis C (when provided to individuals with HIV),

f. Therapeutic measures for preventing and treating the deterioration of the immune system and conditions arising from HIV, and

g. Linkages to diagnostic tests, therapeutic measures, and HIV specific support services.

2. Programs – Community Substance Abuse

3. Measurement Standard: Direct Staff Hour, as defined in sub-sub-subparagraph (3)(a)1., of this rule.

4. Data Elements:

a. Service Documentation – Activity Log:

(I) Staff name and identification number,

(II) Recipient name and identification number,

(III) Service date,

(IV) Duration,

(V) Service (specify), and

(VI) Program.

b. Audit Documentation – Recipient Service Chart:

(I) Recipient name and identification number,

(II) Staff name and identification number,

(III) Service date,

(IV) Duration, and

(V) Service (specify).

~~(n)(k)~~ Incidental Expenses.

1. Description – This Covered Service reports temporary expenses incurred to facilitate continuing treatment and community stabilization when no other resources are available. All incidental expenses shall be authorized by the Managing

Entity. Allowable ~~purchases under uses of~~ this Covered Service ~~includes include~~: transportation, childcare, housing assistance clothing, educational services, vocational services, medical care, housing subsidies, pharmaceuticals and other incidentals as approved by the ~~Department~~ department or Managing Entity.

2. through 3. No change.

4. Data Elements:

a. No change.

b. Audit Documentation – Recipient Service Chart:

(I) through (IV) No change.

(V) Associated ~~treatment~~ plan of care goal,; and;

(VI) No change.

~~(o)(4)~~ Information and Referral.

1. Description – These services maintain information about resources in the community, link people who need assistance with appropriate service providers, and provide information about agencies and organizations that offer services. The information and referral process is comprised of involves: being readily available for contact by the individual,; assisting the individual with determining which resources are needed,; providing referral to appropriate resources,; and following up to ensure the individual’s needs have been met, where appropriate.

2. through 4. No change.

~~(p)(m)~~ In-Home and On-Site.

1. Description – Therapeutic services and supports, including early childhood mental health consultation, are rendered for individuals and their families in non-provider settings such as nursing homes, assisted living facilities, residences, schools school, detention centers, commitment settings, foster homes, daycare centers, and other community settings.

2. through 4. No change.

~~(q)(n)~~ Inpatient.

1. Description – Inpatient services are provided in psychiatric units within hospitals licensed as general hospitals and psychiatric hospitals under Chapter 395, F.S., ~~as general hospitals and psychiatric specialty hospitals~~. They are designed to provide intensive treatment and stabilization to persons exhibiting ~~violent~~ behaviors that may result in harm to self or others due to, suicidal behaviors, and other severe disturbances due to substance abuse or mental illness or co-occurring mental illness and substance use disorder.

2. through 3. No change.

4. Data Elements:

a. No change.

b. Audit Documentation – Recipient Service Chart:

(I) through (II) No change.

(III) Clinical diagnosis, and

(IV) No change.

~~(r)(o)~~ Intensive Case Management.

1. Description – These services are typically offered to persons who are being discharged from an acute care setting, and are in need of more professional care, and have contingency needs to remain in a less restrictive setting. The services include the same components as case management as described in sub-sub-paragraph (4)(d)1., of this rule, but are provided at a higher intensity and frequency, and with lower caseloads per case manager sufficient to meet the needs of the individuals in treatment. Case management services consist of activities aimed at assessing recipient needs, planning services, linking the service system to a recipient, coordinating the various system components, monitoring service delivery, and evaluating the effect of services received. These services are typically offered to persons who are being discharged from a hospital or crisis stabilization unit who are in need of more professional care and who will have contingency needs to remain in a less restrictive setting.

2. Programs – Community Mental Health and Community Substance Abuse.

3. through 4. No change.

~~(s)(p)~~ Intervention.

1. Description – Intervention services focus on reducing risk factors generally associated with the progression of substance misuse abuse and mental health problems. Intervention is accomplished through early identification of persons at risk, performing basic individual assessments, and providing supportive services, which emphasize short-term counseling and referral. These services are targeted toward individuals and families. This covered service shall include clinical supervision provided to a service provider’s personnel by a professional qualified by degree, licensure, certification, or specialized training in the implementation of this service.

2. through 4. No change.

~~(t)(q)~~ Medical Services.

1. Description – Medical services provide primary psychiatric care, therapy, and medication administration provided by an individual licensed under the state of Florida to provide the specific service rendered. Medical services ~~are designed to~~ improve the functioning or prevent further deterioration of persons with mental health or substance abuse problems, including ~~psychiatric~~ mental status assessment. ~~For adults with mental illness, Medical medical~~ services are usually provided on a regular schedule, with arrangements for non-scheduled visits during times of increased stress or crisis.

2. through 4. No change.

~~(u)(r)~~ Medication-Assisted Treatment.

1. Description – This Covered Service provides for the delivery of medications for the treatment of substance use ~~or abuse~~ disorders which are prescribed by a licensed health care

professional. Services must be based upon a clinical assessment, and treatment and support services must be available for and offered to individuals receiving medications to support their ongoing recovery provided in conjunction with substance abuse treatment.

2. through 4. No change.

~~(v)(s)~~ Mental Health Clubhouse Services.

1. Description – Structured, evidence-based services ~~designed to~~ both strengthen and/or regain the individual's interpersonal skills, provide psycho-social support therapy toward rehabilitation, develop the environmental supports necessary to help the individual thrive in the community and meet employment and other life goals, and promote recovery from mental illness. Services are typically provided in a community-based program with trained staff and members working as teams to address the individual's life goals and to perform the tasks necessary for the operations of the program. The emphasis is on a holistic approach focusing on the individual's strengths and abilities while challenging the individual to pursue those life goals. This service would include, but not be limited to, clubhouses certified under the International Center for Clubhouse Development. This covered service may not be provided to a person less than 18 years old.

2. through 4. No change.

~~(w)(t)~~ Outpatient.

1. Description – Outpatient services provide clinical interventions a therapeutic environment, which is designed to improve the functioning or prevent further deterioration of persons with mental health and/or substance use disorders abuse problems. These services are usually provided on a regularly scheduled basis by appointment, with arrangements made for non-scheduled visits during times of increased stress or crisis. Outpatient services may be provided to an individual or in a group setting. ~~The group size limitations applicable to the Medicaid program shall apply to all Outpatient services provided by a SAMH Funded Entity.~~ This covered service shall include clinical supervision provided to a service provider's personnel by a professional qualified by degree, licensure, certification, or specialized training in the implementation of this service.

2. through 4. No change.

~~(x)(u)~~ Outreach.

1. Description – Outreach services are provided through a formal program to both individuals and the community. Community services include education, identification, and linkage with high-risk groups. Outreach services for individuals ~~are designed to:~~ encourage, educate, and engage prospective individuals who show an indication of substance misuse abuse and mental health problems or needs. Individual enrollment is not included in Outreach services.

2. through 4. No change.

~~(y)(v)~~ Prevention – Indicated.

1. Description – Indicated prevention services are provided to at-risk individuals who are identified as having minimal but detectable signs or symptoms foreshadowing mental health disorders or substance use disorders. Target recipients of indicated prevention services are at-risk individuals who do not meet clinical criteria for mental health or substance use abuse disorders. Indicated prevention services ~~are designed to~~ preclude, forestall, or impede the development of mental health or substance use abuse disorders. These services shall address the following specific prevention strategies, as defined in Rule 65D-30.013, F.A.C.: education, alternative and problem identification and referral services.

2. through 4. No change.

~~(z)(w)~~ Prevention – Selective.

1. Description – Selective prevention services are provided to a population subgroup whose risk of developing mental health or substance use abuse disorders is higher than average. Target recipients of selective prevention services do not meet clinical criteria for mental health or substance use abuse disorders. Selective prevention services ~~are designed to~~ preclude, forestall, or impede the development of mental health or substance use abuse disorders. These services shall address the following specific prevention strategies, as defined in Rule 65D-30.013, F.A.C.: information dissemination, education, alternatives, and problem identification and referral services.

2. through 4. No change.

~~(aa)(x)~~ Prevention – Universal Direct.

1. Description – Universal direct prevention services are provided to the general public or a whole population that has not been identified on the basis of individual risk. These services ~~are designed to~~ preclude, forestall, or impede the development of mental health or substance use abuse disorders. Universal direct services directly serve an identifiable group of participants who have not been identified on the basis of individual risk. This includes interventions involving interpersonal and ongoing or repeated contact such as curricula, programs, and classes. These services shall address the following specific prevention strategies, as defined in Rule 65D-30.013, F.A.C.: information dissemination, education, alternatives, or problem identification and referral services.

2. through 4. No change.

~~(bb)(y)~~ Prevention – Universal Indirect.

1. Description – Universal indirect prevention services are provided to the general public or a whole population that has not been identified on the basis of individual risk. These services ~~are designed to~~ preclude, forestall, or impede the development of mental health or substance use disorders. Universal indirect services support population-based programs and environmental strategies such as changing laws and policies. These services can include programs and policies

implemented by coalitions. These services can also include meetings and events related to the design and implementation of components of the strategic prevention framework, including needs assessments, logic models, and comprehensive community action plans. These services shall address the following specific prevention strategies, as defined in Rule 65D-30.013, F.A.C.: information dissemination, education, community-based processes, and environmental strategies.

2. through 4. No change.

~~(cc)(z)~~ Recovery Support.

1. Description – This Covered Service is comprised of nonclinical activities that assist individuals and families in recovering from substance use and mental health conditions. Activities include social support, linkage to and coordination among service providers, life skills training, recovery planning, coaching, education on mental illness and substance use disorders, and other supports that facilitate increasing recovery capital and wellness contributing to an improved quality of life. Recovery capital is the personal, family, social, community resources and natural supports that promote recovery. These activities may be provided prior to, during, and after treatment. These services ~~are designed to~~ support and coach an adult or child and family to regain or develop skills to live, work and learn successfully in the community. ~~Services include substance abuse or mental health education, assistance with coordination of services as needed, skills training, and coaching.~~ This Covered Service shall include clinical supervision provided to a service provider's personnel by a professional qualified by degree, licensure, certification, or specialized training in the implementation of this service, or by a certified peer specialist who has at least 2 years of full-time experience as a peer specialist at a licensed behavioral health organization. This Covered Service must be provided by a Certified Recovery Peer Specialist pursuant to section 397.417, F.S. For Adult Mental Health and Children's Mental Health Programs, these services are provided by a Certified Family, Veteran, or Recovery Peer Specialist. For Adult and Children's Substance Abuse programs, these services may be provided by a certified Peer Recovery Specialist or trained paraprofessional staff subject to supervision by a Qualified Professional as defined in Rule 65D 30.002, F.A.C. These services exclude twelve-step programs such as Alcoholics Anonymous and Narcotics Anonymous.

2. through 4. No change.

~~(dd)(aa)~~ Residential Level I.

1. Description – These licensed services provide a structured, live-in, non-hospital setting with supervision on a twenty-four hours per day, seven days per week basis. ~~A nurse is on duty in these facilities at all times.~~ For adult mental health, Residential Treatment Facilities Level IA and IB, as defined in

Rule 65E-4.016, F.A.C., are reported under this Covered Service. ~~these services include group homes. Group homes are for longer term residents. These facilities offer nursing supervision provided by, at a minimum, licensed practical nurses on a twenty-four hours per day, seven days per week basis.~~ For children with serious emotional disturbances, Level 1 services are the most intensive and restrictive level of residential therapeutic intervention provided in a non-hospital or non-crisis stabilization setting, support unit setting, including residential treatment centers. Medicaid Residential Treatment Centers, as defined in Rule 65E-9.002, F.A.C., and Residential Treatment Centers are reported under this Covered Service. ~~On-call medical care shall be available for substance abuse programs.~~ Level 1 provides a range of assessment, treatment, rehabilitation, and ancillary services in an intensive therapeutic environment, with an emphasis on treatment, and may include formal school and adult education programs.

2. through 4. No change.

~~(ee)(bb)~~ Residential Level II.

1. Description – Level II facilities are licensed, structured rehabilitation-oriented group facilities that have twenty-four hours per day, seven days per week, supervision. Level II facilities house persons who have significant deficits in independent living skills and need extensive support and supervision. For adults with a mental illness, Residential Treatment Facilities Level II, as defined in Rule 65E-4.016, F.A.C., are reported under this Covered Service. For children with serious emotional disturbances, Level II services provide are programs specifically designed for the purpose of providing intensive therapeutic behavioral and treatment interventions. ~~Therapeutic Group Home, Specialized Therapeutic Foster Homes Home Level II, and Therapeutic Foster Home Level 2~~ are reported under this Covered Service. For substance use treatment abuse, Level II services provide a range of assessment, treatment, rehabilitation, and ancillary services in a less intensive therapeutic environment with an emphasis on rehabilitation, and may include formal school and adult educational programs.

2. through 4. No change.

~~(ff)(ee)~~ Residential Level III.

1. Description – These licensed facilities provide twenty-four hours per day, seven days per week supervised residential alternatives to persons who have developed a moderate functional capacity for independent living. For adults with a mental illness, Residential Treatment Facilities Level III, as defined in Rule 65E-4.016, F.A.C., are reported under this Covered Service. ~~For children with serious emotional disturbances, Level III services are specifically designed to provide sparse therapeutic behavioral and treatment interventions. Therapeutic Group Home, Specialized~~

~~Therapeutic Foster Home—Level I, and Therapeutic Foster Home—Level I are reported under this Covered Service. For adults with serious mental illness, this Covered Service consists of supervised apartments. For substance use treatment abuse, Level III provides a range of assessment, rehabilitation, treatment and ancillary services on a long-term, continuing care basis where, depending upon the characteristics of the individuals served, the emphasis is on rehabilitation or treatment.~~

2. through 4. No change.

~~(gg)(dd)~~ Residential Level IV.

1. Description – This type of facility may have less than twenty-four hours per day, seven days per week on-premise supervision. It is primarily a support service and, as such, treatment services are not included in this Covered Service, although such treatment services may be provided as needed through other Covered Services. Level IV includes satellite apartments, satellite group homes, and therapeutic foster homes. For adults with a mental illness, Residential Treatment Facilities Level IV, as defined in paragraph 65E-4.016, F.A.C., are reported under this Covered Service. For children with serious emotional disturbances, Level IV services are the least intensive and restrictive level of residential care provided in group or foster home settings, therapeutic foster homes, and group care. Regular therapeutic foster care can be provided either through Residential Level IV “Day of Care: Therapeutic Foster Home” or by billing in home/non provider setting for a child in a foster home.

2. through 4. No change.

~~(hh)(ee)~~ Respite Services Level I.

1. Description – Respite care services support are designed to sustain the family or other primary care giver by providing time-limited, temporary relief from the ongoing responsibility of care giving. Respite Services Level I are billed as a direct staff hour when the duration of the services is less than ten hours.

2. through 3. No change.

4. Data Elements:

a. Service Documentation – Service Ticket:

(I) through (VI) No change.

(VII) Respite service type, Service (specify); and,

(VIII) Program.

b. No change.

~~(ii)~~ Respite Services Level II.

1. Description – Respite care services support the family or other primary care giver by providing time-limited, temporary relief from the ongoing responsibility of care giving. Respite Services Level II are billed as a day rate when the duration of the services is for ten hours or more.

2. Programs – Community Mental Health and Community Substance Abuse.

3. Measurement Standard – Day, as defined in sub-sub-paragraph (3)(a)3.a.(II), of this rule.

4. Data Elements:

a. Service Documentation – Census Log:

(I) Covered Service,

(II) Program,

(III) Recipient name and identification,

(IV) Clinical diagnosis,

(V) Service date, and

(VI) Respite service type.

b. Audit Documentation – Recipient Service Chart:

(I) Covered Service,

(II) Recipient name and identification number, and,

(III) Service date.

~~(jj)(ff)~~ Room and Board with Supervision Level I.

1. Description – This Covered Service solely provides for room and board with supervision on a twenty-four hours per day, seven days per week basis. It corresponds to Residential Level I as defined in paragraph (4)(dd) ~~(4)(aa)~~, of this rule. ~~This Covered Service is not applicable for provider facilities which meet the definition of an Institute for Mental Disease as defined by Title 42 CFR, Part 435.1010.~~

2. through 4. No change.

~~(kk)(gg)~~ Room and Board with Supervision Level II.

1. Description – This Covered Service solely provides for room and board with supervision on a twenty-four hours per day, seven days per week basis. It corresponds to Residential Level II as defined in paragraph (4)(ee) ~~(4)(bb)~~, of this rule. ~~This Covered Service is not applicable for provider facilities which meet the definition of an Institute for Mental Disease as defined by Title 42 CFR, Part 435.1010.~~

2. through 4. No change.

~~(ll)(hh)~~ Room and Board with Supervision Level III.

1. Description – This Covered Service solely provides for room and board with supervision on a twenty-four hours per day, seven days per week basis. It corresponds to Residential Level III as defined in paragraph (4)(ff) ~~(4)(ee)~~, of this rule. ~~This Covered Service is not applicable for provider facilities which meet the definition of an Institute for Mental Disease as defined by Title 42 CFR, part 435.1010.~~

2. through 4. No change.

~~(mm)~~ Room and Board with Supervision Level IV.

1. Description – This Covered Service solely provides for room and board with supervision on a twenty-four hours per day, seven days per week basis. It corresponds to Respite Level II as defined in paragraph (4)(ii), of this rule.

2. Programs – Community Mental Health and Community Substance Abuse.

3. Measurement Standard – Day, as defined in sub-sub-paragraph (3)(a)3.a.(II), of this rule.

4. Data Elements:

a. Service Documentation – Census Log:

- (I) Covered Service,
- (II) Program,
- (III) Recipient name and identification,
- (IV) Clinical diagnosis,
- (V) Service date, and
- (VI) Residential type.

b. Audit Documentation – Recipient Service Chart:

- (I) Covered Service,
- (II) Recipient name and identification number, and
- (III) Service date.
- (nn)(ii) Short-term Residential Treatment.

1. Description – These individualized, stabilizing acute and immediately sub-acute care services provide short and intermediate duration intensive mental health residential and ~~habilitative~~ services on a twenty-four hours per day, seven days per week basis, as provided for in Rule Chapter 65E-12, F.A.C. These services shall meet the needs of individuals who are experiencing an acute or immediately sub-acute crisis and who, in the absence of a suitable alternative, would require hospitalization. ~~This covered service may not be provided to a person less than 18 years old.~~

2. through 4. No change.

(oo)(jj) Substance Abuse Inpatient Detoxification.

1. Description – These programs utilize medical and clinical procedures to assist adults, ~~children,~~ and adolescents with substance ~~use disorders~~ abuse problems in their efforts to withdraw from physical ~~the physiological and psychological~~ effects of substance ~~use~~ abuse. Residential detoxification and addiction receiving facilities provide emergency screening, evaluation, short-term stabilization, and treatment in a medically supervised ~~secure~~ environment.

2. through 4. No change.

(pp)(kk) Substance Abuse Outpatient Detoxification.

1. Description – These services utilize medication or a psychosocial counseling regimen that assists recipients in their efforts to withdraw from the physiological and psychological effects of ~~the abuse of~~ addictive substances.

2. through 4. No change.

(qq)(ll) Supported Employment.

1. Description – Supported employment assist individuals with gaining competitive integrated employment. All individuals enrolled in one of the Department’s priority populations and interested in work are eligible for these services. Evidence-based supported employment is a team-based approach that focuses on the full range of community jobs that match the job seeker’s strengths and preferences. Job supports are individualized and provided as long as desired and needed. Individuals are assisted in making job changes to promote career advancement. ~~services are evidence-based~~

~~community-based employment services in an integrated work setting which provides regular contact with non-disabled co-workers or the public. A job coach provides longer term, ongoing support for as long as it is needed to enable the recipient to maintain employment.~~

2. through 4. No change.

(rr)(mm) Supportive Housing/Living.

1. Description – Supported housing/living is an evidence-based approach to assist persons with substance ~~use~~ abuse and mental illness in the selection of permanent housing of their choice. These services also provide the necessary ~~services and~~ supports to transition into independent community living and assure continued successful living in the community ~~and transitioning into the community.~~ For children with mental health challenges ~~problems~~, supported living services are a process which assist ~~assists~~ adolescents in selecting and maintaining housing arrangements and provides services, such as training in independent living skills, to assure successful transition to independent living or with roommates in the community. ~~Services include training in independent living skills.~~ For substance use treatment ~~abuse~~, services provide for the housing placement and monitoring of recipients who are participating in non-residential services; recipients who have completed or are completing substance use ~~abuse~~ treatment; and those recipients who need assistance and support in independent or supervised living within a “live-in” environment.

2. through 4. No change.

(ss)(nn) Treatment Alternatives for Safer Communities (TASC).

1. Description – TASC provides for identification, screening, court liaison, referral and tracking of persons in the criminal justice system with a history of substance use ~~abuse~~ or addiction.

2. through 4. No change.

(5) No change.

(6) Setting Rates.

(a) Negotiated Rates.

1. through 2. No change.

3. When proposing projected rates on the Agency Capacity Report, the service provider shall use the number of units derived using the following minimum productivity and utilization standards:

a. Direct Staff Hour – Annualized Standard Units: 1,252 hours per FTE; Standard Percentage: 60.19 percent.

(I) Exceptions:

(II) For paragraph (4)(h)(f), Crisis Support/Emergency, and paragraph (4)(o)(f), Information and Referral – Annualized Standard Units: 2,080 hours per FTE; Standard Percentage: 100 percent.

(III) For paragraph (4)(l)(j), FACT – Annualized Standard Units: 1,788 hours per FTE; Standard Percentage: 85.96 percent.

(IV) For paragraph (4)(v)(s), Mental Health Clubhouse – Annualized Standard Units: 1,768 hours per FTE; Standard Percentage: 85 percent.

(V) For paragraph (4)(i)(g), Day care; paragraph (4)(j)(h), Day Treatment; paragraph (4)(y)(w), Prevention – Indicated; and paragraph (4)(pp)(kk), Substance Abuse Outpatient Detoxification – Annualized Standard Units to be established through negotiation between the department or Managing Entity and the service provider; Standard Percentage: 90 percent.

b. Non-Direct Staff Hour – Annualized Standard Units: 1,430 hours per FTE; Standard Percentage: 68.75 percent, except for paragraph (4)(k)(i). Drop-in/Self help Centers – Annualized Standard Units: To be established through negotiation between the department or Managing Entity and the service provider; Standard Percentage: 100 percent.

c. Day – Annualized Standard Units: 365 Days or 366 Days during Leap Year; Standard Percentage: 100 percent, except paragraphs (4)(dd) – (gg)(aa)–(dd). Residential I-IV; paragraphs(4)(jj) – (mm)(ff)–(hh), Room and Board with Supervision I-III Annualized Standard Units: 365 Days; Standard Percentage: 85 percent.

d. Dosage – Annualized Standard Units: To be established through negotiation between the department or Managing Entity and the service provider; Standard Percentage: 100 percent.

4. Nothing herein shall preclude the department or Managing Entity from using audited data on actual expenditures to analyze the projected rates submitted by a SAMH-Funded Entity.

(b) No change.

(7) No change.

~~(8) All forms incorporated by reference in subsection (5), of this rule, may be obtained from the Office of Substance Abuse and Mental Health, 1317 Winewood Blvd., Building 6, Tallahassee, Florida 32399-0700.~~

Rulemaking Authority 394.78(1), (5), 394.9082(3), 397.321(5), 402.73 FS. Law Implemented 394.74(2)(b), (3)(d), (e), (4), 394.77, 394.78(1), (5), 394.9082, 397.321(10), 402.73(1) FS. History—New 7-1-03, Amended 12-14-03, 1-2-05, 7-27-14, 6-28-15, 4-27-16. Amended _____.

NAME OF PERSON ORIGINATING PROPOSED RULE:
William Hardin, Heather Allman

NAME OF AGENCY HEAD WHO APPROVED THE PROPOSED RULE: Shevaun Harris

DATE PROPOSED RULE APPROVED BY AGENCY HEAD: August 15, 2022

DATE NOTICE OF PROPOSED RULE DEVELOPMENT PUBLISHED IN FAR: September 7, 2022

Section III Notice of Changes, Corrections and Withdrawals

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

Board of Architecture and Interior Design

RULE NO.: RULE TITLE:

61G1-13.004 Pre-Licensure Education Requirements
NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 46 No. 242, December 15, 2020 issue of the Florida Administrative Register.

A Notice of Change was published in Vol. 48, No. 60, of the March 28, 2022, issue of the Florida Administrative Register. The changes are in response to written comments submitted by the staff of the Joint Administrative Procedures Committee and discussion and subsequent vote by the board at a public meeting held April 29, 2022. The changes are as follows:

61G1-13.004 – Pre-Licensure Education Requirements.

(1) No change.

(2) Applicants ~~All endorsement applicants~~ may comply with ~~wind mitigation techniques~~ this requirement by completing at least two (2) hours of the following ~~the National Council of Architectural Registration Boards (NCARB) courses Part II of Wind Forces Part II: Wind Effects on Building/Procedures for Wind Resistant Design and Practice,~~ published _____ 2017, at https://ce.ncarb.org/program_online_view_sa.php?prc=internal&pid=162:

(a) Wind Forces Part I: The Nature of Wind & Its Implications for Buildings;

(b) Wind Forces Part II: Wind Effects on Building/Procedures for Wind-Resistant Design and Practice;

(c) Wind Forces Part III: Concepts& Descriptive Examples of Building Design for Wind;

(d) Wind Forces Part IV: Improving Building Wind Resistance & Stabilization, and/or

(e) Wind Forces Part V: Wind Pressure Analysis, Strengthening Buildings, & Practice Considerations.

~~or wind mitigation courses specifically approved by the board.~~

Rulemaking Authority 481.213(6) FS. Law Implemented 481.213(3) F.S. - History -NEW.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Amanda Ackermann, Executive Director, Board of Architecture and Interior Design, 2601 Blair Stone Road, Tallahassee, FL 32399-0790, or by electronic mail – Amanda.Ackermann@myfloridalicense.com.

DEPARTMENT OF HEALTH

Board of Dentistry

RULE NO.: 64B5-13.005
 RULE TITLE: Disciplinary Guidelines
 NOTICE OF CHANGE

Notice is hereby given that the following changes have been made to the proposed rule in accordance with subparagraph 120.54(3)(d)1., F.S., published in Vol. 47 No. 188, September 28, 2021 issue of the Florida Administrative Register.

A Notice of Change was published in Vol. 48, No. 67, of the April 6, 2022, issue of the Florida Administrative Register. A Notice off Change was published in Vol. 48, No. 123, of the June 24, 2022, issue of the Florida Administrative Register. The changes are in response to written comments submitted by the staff of the Joint Administrative Procedures Committee and discussion and subsequent vote by the board at a public meeting held August 12, 2022. The changes are as follows:

64B5-13.005 Disciplinary Guidelines.

(1) When the Board finds an applicant, licensee, certificate holder, or telehealth registrant whom it regulates under chapter 466, F.S., has committed any of the acts set forth in section 456.072(1), 466.028, or 456.47, F.S., it shall issue a final order imposing appropriate penalties as recommended in these disciplinary guidelines. For any violation found that is for fraud or making a false or fraudulent representation, the Board will impose a fine of \$10,000.00 per count or offense. The use of terms to describe the offenses herein within the individual guidelines is intended to be only a generally descriptive use of the terms. For an accurate description of the actual offenses, the

reader should refer to the statutory disciplinary provisions. The maximum penalties set forth in any individual offense guideline include all of the less severe penalties that would fall in between the maximum and the minimum penalties stated. For telehealth registrants, a suspension may be accompanied by a corrective action plan that addressees the conduct which resulted in the underlying disciplinary violations. The Board may require a corrective action plan be completed prior to reinstatement of the suspended registration or the corrective action plan may follow a suspension for a definite term.

VIOLATION	PENALTY RANGE			
	MINIMUM	MAXIMUM	TELEHEALTH REGISTRANT MINIMUM	TELEHEALTH REGISTRANT MAXIMUM
(a) Attempting to obtain, obtaining or renewing a license by bribery, fraudulent misrepresentations or error of the Board. (Sections 466.028(1)(a), 456.072(1)(h), F.S.)				
1. Obtain license by bribery.	No change.			
2. Obtain license by fraudulent misrepresentations.				
First Offense	Denial, \$10,000 fine and referral to State Attorney	No change.	No change.	No change.

	s office if not licensed.			
Second Offense	Probation with conditions and \$10,000 fine.	No change.	No change.	No change.
(b) through (III) No change.				

(2) through (5) No change.

Rulemaking Authority 456.079(1), 456.47(7), FS. Law Implemented 456.072(2), 456.079(1), 456.47(4), 466.028 FS. History—New 12-31-86, Amended 2-21-88, 1-18-89, 12-24-91, Formerly 21G-13.005, 61F5-13.005, 59Q-13.005, Amended 4-2-02, 8-25-03, 2-27-06, 12-25-06, 6-11-07, 9-15-10, 12-2-10, 1-24-12, 4-25-17, 11-14-18, _____.

THE PERSON TO BE CONTACTED REGARDING THE PROPOSED RULE IS: Jessica Sapp, Executive Director, Board of Dentistry/MQA, 4052 Bald Cypress Way, Bin #C04, Tallahassee, Florida 32399-3258; Jessica.Sapp@flhealth.gov

DEPARTMENT OF HEALTH

Board of Psychology

RULE NO.: 64B19-18.004 RULE TITLE: Use of Test Instruments

NOTICE OF WITHDRAWAL

Notice is hereby given that the above rule, as noticed in Vol. 48 No. 59, March 25, 2022 issue of the Florida Administrative Register has been withdrawn.

DEPARTMENT OF CHILDREN AND FAMILIES

Agency for Persons with Disabilities

RULE NO.: 65G-14.005 RULE TITLE: Disciplinary Action

NOTICE OF CORRECTION

Notice is hereby given that the following correction has been made to the proposed rule in Vol. 48 No. 172, September 2, 2022 issue of the Florida Administrative Register.

Proposed Rule 65G-14.005. The following will be added to the end of the Rule: Rulemaking Authority 393.0662(~~7~~), (~~15~~), 393.0663(~~5~~), 393.501(~~4~~), F.S. Law Implemented 393.063, 393.0662, 393.0663(~~3~~), ~~393.063~~; F.S. History—New 7-1-21, Amended _____.

**Section IV
Emergency Rules**

NONE

**Section V
Petitions and Dispositions Regarding Rule
Variance or Waiver**

DEPARTMENT OF HEALTH

Board of Nursing

RULE NO.: RULE TITLE:

64B9-3.002 Qualifications for Examination

NOTICE IS HEREBY GIVEN that on August 24, 2022, the Board of Nursing, received a petition for variance or waiver filed by Fiona Stone. Petitioner requests a variance or waiver from subsection 64B9-3.002(3), F.A.C., which states in part, that for an applicant writing the examination for practical nurses on the basis of practical nursing education equivalency, the applicant must submit a completed Practical Nurse Equivalence (PNEQ) Application Letter or an official certified transcript which sets forth graduation from an approved professional program.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Joe R. Baker, Jr, Executive Director, Board of Nursing, 4052 Bald Cypress Way, Bin #C02, Tallahassee, Florida 32399-3252; MQA.Nursing@flhealth.gov.

Comments on this petition should be filed with the Board of Nursing within 14 days of publication of this notice.

DEPARTMENT OF CHILDREN AND FAMILIES

Family Safety and Preservation Program

RULE NO.: RULE TITLE:

65C-46.019 Standards for At-Risk Houses

The Department of Children and Families hereby gives notice: An order was issued disposing of the petition for variance from paragraph 65C-46.019(4)(a), Florida Administrative Code, from Family Ministries of Florida. The Notice of Variance or Waiver was published on June 10, 2022 in volume 48, number 113 of the Florida Administrative Register. Paragraph 65C-46.019(4)(a) requires the child-caring agency to ensure all direct care staff complete pre-service training requirements in paragraph 65C-46.011(9)(c), F.A.C., and receive an additional 24 hours of Department-approved, specialized training on human trafficking prior to working with youth. The 24-hour Department approved training on human trafficking shall be instruction lead and delivered by a trainer certified by the Department. See Rule 65C-43.004, F.A.C., for information on this required specialized training.

Petitioner filed a written withdrawal of the request after the Department amended the pertinent rule, which rendered a variance unnecessary. The petition for variance was accordingly dismissed.

A copy of the Order or additional information may be obtained by contacting: Agency Clerk, Department of Children and

Families, 2415 North Monroe Street, Suite 400, Tallahassee, FL 32303 or Agency.Clerk@myflfamilies.com.

DEPARTMENT OF CHILDREN AND FAMILIES

Substance Abuse Program

RULE NO.: RULE TITLE:

65D-30.0141 Needs Assessment for Medication-Assisted Treatment for Opioid Use Disorders

The Department of Children and Families hereby gives notice: The Department has issued an order disposing of the petition for waiver of subsection 65D-30.0141(2), Florida Administrative Code, from Operation PAR, Inc. The Notice of Variances and Waivers was published in Volume 48, No. 113 of the Florida Administrative Register on June 10, 2022. Subsection 65D-30.0141(2) of the Code requires awarded applicants to receive at least a probationary license within two (2) years of receipt of an award letter connected to their Methadone Medication-Assisted Treatment Application to Proceed to Licensure Application. If an applicant fails to obtain a probationary license within the specified time, the Department shall rescind the award.

The petition for waiver was granted because Petitioner demonstrated a substantial hardship and that the underlying purpose of the statute will be achieved.

A copy of the Order or additional information may be obtained by contacting: Agency Clerk, Department of Children and Families, 2415 North Monroe Street, Suite 400, Tallahassee, FL 32303 or Agency.Clerk@myflfamilies.com.

DEPARTMENT OF CHILDREN AND FAMILIES

Mental Health Program

RULE NO.: RULE TITLE:

65E-4.016 Mental Health Residential Treatment Facilities

NOTICE IS HEREBY GIVEN that on August 29, 2022, the Department of Children and Families, received a petition for variance from or waiver of subsection 65E-4.016(1), Florida Administrative Code, from ViaMar Health Institutes of the Palm Beaches, LLC. Subsection 65E-4.016(1), states, in pertinent part, that residential treatment facilities that primarily provide treatment for eating disorders, weight loss programs, substance abuse or other specialty psychiatric treatment program are excluded from licensure under this rule.

A copy of the Petition for Variance or Waiver may be obtained by contacting: Agency Clerk, Department of Children and Families, 2415 North Monroe Street, Suite 400, Tallahassee, FL 32303 or Agency.Clerk@myflfamilies.com.

Section VI

Notice of Meetings, Workshops and Public Hearings

DEPARTMENT OF EDUCATION

State Board of Education

The Department of Education announces a public meeting to which all persons are invited.

DATE AND TIME: September 15, 2022, 10:00 a.m.

PLACE: Conference Call: 1-800-496-4034, Passcode: 797680.

This meeting will be webcast at <https://thefloridachannel.org>.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The meeting will consist of an update on the Final Report of the Twentieth Statewide Grand Jury and Approval of the 2023-24 Education Operating and Fixed Capital Outlay Budget Request. A copy of the agenda may be obtained by contacting: Chris Emerson at 850-245-9601 or Christian.Emerson@fldoe.org or by visiting the Department's website at <http://www.fldoe.org/policy/state-board-of-edu/meetings>.

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 five days before the workshop/meeting by contacting: Chris Emerson at 850-245-9601 or Christian.Emerson@fldoe.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).

For more information, you may contact: Chris Emerson at 850-245-9601 or Christian.Emerson@fldoe.org.

FLORIDA COMMISSION ON OFFENDER REVIEW

The Florida Commission on Offender Review announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, September 26, 2022, 10:00 a.m.

PLACE: Florida Commission on Offender Review, 4070 Esplanade Way, Tallahassee, FL 32399-2450

The meeting will also be held via conference call. To participate in the meeting, call United States (Toll Free): 1 877 309 2073 or United States: +1 (571) 317-3129 and dial access code 337-350-165. For questions and correspondence from inmate supporters, please email inmatessupporter@fcor.state.fl.us. For questions and correspondence regarding victims' rights, please email victimquestions@fcor.state.fl.us.

GENERAL SUBJECT MATTER TO BE CONSIDERED: Regularly scheduled Commission Business Meeting.

A copy of the agenda may be obtained by contacting: Sandra Kelly, Office of Commissioner David Wyant, (850) 487-1978, sandrakelly@fcor.state.fl.us.

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: Sandra Kelly, Office of Commissioner David Wyant, (850) 487-1978, sandrakelly@fcor.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).

EXECUTIVE OFFICE OF THE GOVERNOR

Division of Emergency Management

The State Emergency Response Commission announces a public meeting to which all persons are invited.

DATES AND TIMES: October 13, 2022, 9:30 a.m.; October 13, 2022, 1:30 p.m.; October 14, 2022, 10:00 a.m.

PLACE: Hotel Effie - Sandestin Golf & Beach Resort, 1 Grand Sandestin Blvd., Miramar Beach, FL 32550

GENERAL SUBJECT MATTER TO BE CONSIDERED: "To discuss the requirements of the Emergency Planning and Community Right-To-Know Act, also known as Title III of the Superfund Amendments and Reauthorization Act of 1986."

Training Task Force October 13, 2022, 9:30 a.m.

Local Emergency Planning Committee October 13, 2022, 1:30 p.m.

State Emergency Response Commission October 14, 2022, 10:00 a.m.

A copy of the agenda may be obtained by contacting: Pebbles Simmons, State Emergency Response Commission Coordinator, Pebbles.Simmons@em.myflorida.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 48 hours 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).

REGIONAL PLANNING COUNCILS

North Central Florida Regional Planning Council

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

DATE AND TIME: September 15, 2022, 1:00 p.m.

PLACE: Columbia County Emergency Operations Center, 263 NW Lake City Avenue, Lake City, FL and via Communications Media Technology

To join the meeting from your computer, tablet or smartphone.

<https://columbia-bocc.webex.com/columbia-bocc/j.php?MTID=m7eb15968734df0689d73433077dcb768>

DIAL IN NUMBER: 1-844-621-3956

MEETING ID: 2632 016 8270

PASSCODE: dKeuXJtR223

Communications media technology facilities will be available at 2009 NW 67th Place, Gainesville, Florida 32653-1603 for persons interested in accessing the virtual meeting.

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct the regular business of the North Central Florida Regional Hazardous Materials Response Team Policy Board.

A copy of the agenda may be obtained by contacting: Scott Koons, Executive Director, North Central Florida Regional Planning Council, 2009 NW 67th Place, Gainesville, FL 32653.

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 business days before the workshop/meeting by contacting: 352.955.2200. 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.

REGIONAL PLANNING COUNCILS

North Central Florida Regional Planning Council

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

DATE AND TIME: September 15, 2022, 10:00 a.m.

PLACE: Columbia County Emergency Operations Center, 263 NW Lake City Avenue, Lake City, FL and via Communications Media Technology

To join the meeting from your computer, tablet or smartphone.

<https://columbia-bocc.webex.com/columbia-bocc/j.php?MTID=mb88516db5fa06d7f774e5b7b4169bcb7>

DIAL IN NUMBER: 1-844-621-3956

MEETING ID: 2632 915 2449

PASSCODE: m3Pu7UptHX3

Communications media technology facilities will be available at 2009 NW 67th Place, Gainesville, Florida 32653-1603 for persons interested in accessing the virtual meeting.

GENERAL SUBJECT MATTER TO BE CONSIDERED: To conduct the regular business of the North Central Florida Local Emergency Planning Committee.

A copy of the agenda may be obtained by contacting: Scott Koons, Executive Director, North Central Florida Regional Planning Council, 2009 NW 67th Place, Gainesville, FL 32653.

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 business days before the workshop/meeting by contacting: 352.955.2200. 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).

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REGIONAL PLANNING COUNCILS

Central Florida Regional Planning Council

The The Heartland Regional Transportation Planning Organization (HRTPO) announces a public meeting to which all persons are invited.

DATE AND TIME: September 21, 2022, 10:00 a.m.

PLACE: Town of Lake Placid Government Center (1069 US-27, Lake Placid, FL)

GENERAL SUBJECT MATTER TO BE CONSIDERED: Regular meeting of the Heartland Regional Transportation Planning Organization (HRTPO) Board.

A copy of the agenda may be obtained by contacting: Marybeth Soderstrom, Transportation Director, at 1(863)534-7130, ext. 134 or msoderstrom@cfrpc.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 3 days before the workshop/meeting by contacting: Marybeth Soderstrom, Transportation Director, at 1(863)534-7130, ext. 134 or msoderstrom@cfrpc.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: Marybeth Soderstrom, Transportation Director, at 1(863)534-7130, ext. 134 or msoderstrom@cfrpc.org.

WATER MANAGEMENT DISTRICTS

Suwannee River Water Management District

The Suwannee River Water Management District announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, September 26, 2022, 3:00 p.m.

PLACE: District Headquarters, 9225 CR 49, Live Oak, FL 32060

GENERAL SUBJECT MATTER TO BE CONSIDERED: Board Workshops, Public Hearings, Committee Meetings, and/or Board Meeting. All or part of this meeting may be conducted by means of communications media technology. GoTo Webinar information regarding viewing of and participation in the meeting will be available on the District’s website at www.mysuwanneeriver.com. One or more Governing Board members may attend and participate in the meetings by means of communications media technology.

A copy of the agenda may be obtained by contacting: (386)362-1001 or 1(800)226-1066 (Florida only) or on the District’s website at www.mysuwanneeriver.com, when published.

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: (386)362-1001 or 1(800)226-1066 (Florida only). 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.

WATER MANAGEMENT DISTRICTS

Suwannee River Water Management District

The Suwannee River Water Management District announces a public meeting to which all persons are invited.

DATE AND TIME: Monday, September 26, 2022, 5:05 p.m.

PLACE: District Headquarters, 9225 CR 49, Live Oak, FL 32060

GENERAL SUBJECT MATTER TO BE CONSIDERED: Official presentation of the Fiscal Year 2022-2023 Final Millage Rate and Final Budget Public Hearing and opportunity to receive public comment prior to consideration and adoption by the Governing Board. All or part of this meeting may be conducted by means of communications media technology. GoTo Webinar information regarding viewing of and participation in the meeting will be available on the District’s website at www.mysuwanneeriver.com. One or more Governing Board members may attend and participate in the meetings by means of communications media technology.

A copy of the agenda may be obtained by contacting: A copy of the agenda may be obtained by contacting: (386)362-1001 or 1(800)226-1066 (Florida only) or on the District’s website at www.mysuwanneeriver.com, when published.

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: (386)362-1001 or 1(800)226-1066 (Florida only). 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).

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DEPARTMENT OF HEALTH

Board of Medicine

The Florida Board of Medicine's Council on Physician Assistants announces a public meeting to which all persons are invited.

DATE AND TIME: (UPDATE/CANCELLATION) Thursday, September 29, 2022, beginning at 11:00 a.m. EST, or soon thereafter. This meeting has been cancelled as of Wednesday, September 7, 2022.

PLACE: You may join the virtual meeting from your computer, tablet, or smartphone through the following link: <https://global.gotomeeting.com/join/717632629>. You may also join the meeting via telephone at (571) 317-3112 using the access code 717-632-629. To maximize your access to the meeting, the Department recommends that you download the GoToMeeting app on your computer, tablet, or smartphone prior to the meeting. If you are required to or otherwise intend to make an appearance before the Council, you must do so from a quiet place with limited activity. You may not appear from your car. The Department also recommends that you connect to the meeting platform at least 15 minutes prior to the start of the meeting to make sure you can successfully establish a connection.

GENERAL SUBJECT MATTER TO BE CONSIDERED: General business of the Council. Council meetings may be canceled prior to the meeting date. Please check the Board's website at <https://flboardofmedicine.gov/meeting-information> for cancellations or changes to the meeting date or time or call the Board at (850) 245-4131 for more information.

A copy of the agenda may be obtained by contacting: <https://flboardofmedicine.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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131. 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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131.

DEPARTMENT OF EDUCATION

State Board of Education

The Department of Education announces a public meeting to which all persons are invited.

DATE AND TIME: September 15, 2022, 10:00 a.m.

PLACE: Conference Call: 1-800-496-4034, Passcode: 797680.

This meeting will be webcast at <https://thefloridachannel.org>.

GENERAL SUBJECT MATTER TO BE CONSIDERED: The meeting will consist of an update on the Final Report of the Twentieth Statewide Grand Jury and Approval of the 2023-24 Education Operating and Fixed Capital Outlay Budget Request. A copy of the agenda may be obtained by contacting: Chris Emerson at 850-245-9601 or Christian.Emerson@fldoe.org or by visiting the Department's website at <http://www.fldoe.org/policy/state-board-of-edu/meetings>.

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 five days before the workshop/meeting by contacting: Chris Emerson at 850-245-9601 or Christian.Emerson@fldoe.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).

For more information, you may contact: Chris Emerson at 850-245-9601 or Christian.Emerson@fldoe.org.

DEPARTMENT OF HEALTH

Board of Medicine

The Florida Boards of Medicine and Osteopathic Medicine's Joint Surgical Care/Quality Assurance Committee announces a public meeting to which all persons are invited.

DATE AND TIME: Thursday, October 6, 2022, 1:00 p.m. EST, or soon thereafter.

PLACE: The Westshore Grand, A Tribute Portfolio Hotel, 4860 West Kennedy Boulevard, Tampa, Florida 33609. The hotel's phone number is (813) 286-4400. The hotel's website is <https://www.marriott.com/en-us/hotels/tpagr-the-westshore-grand-a-tribute-portfolio-hotel-tampa>. The public rate is \$169 per night.

GENERAL SUBJECT MATTER TO BE CONSIDERED: General business of the Committee. Committee meetings may be canceled prior to the meeting date. Please check the Board's website at <https://flboardofmedicine.gov/meeting-information> for cancellations or changes to the meeting date or time or call the Board at (850) 245-4131 for more information.

A copy of the agenda may be obtained by contacting: <https://flboardofmedicine.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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131. 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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131.

DEPARTMENT OF HEALTH

Board of Medicine

The Florida Boards of Medicine and Osteopathic Medicine Joint Rules/Legislative Committee announces a public meeting to which all persons are invited.

DATE AND TIME: Thursday, October 6, 2022, 4:00 p.m. EST, or soon thereafter.

PLACE: The Westshore Grand, A Tribute Portfolio Hotel, 4860 West Kennedy Boulevard, Tampa, Florida 33609. The hotel's phone number is (813) 286-4400. The hotel's website is <https://www.marriott.com/en-us/hotels/tpagr-the-westshore-grand-a-tribute-portfolio-hotel-tampa>. The public rate is \$169 per night.

GENERAL SUBJECT MATTER TO BE CONSIDERED: General business of the Committee. Committee meetings may be canceled prior to the meeting date. Please check the Board's website at <https://flboardofmedicine.gov/meeting-information> for cancellations or changes to the meeting date or time or call the Board at (850) 245-4131 for more information.

A copy of the agenda may be obtained by contacting: <https://flboardofmedicine.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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131. 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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131.

DEPARTMENT OF HEALTH

Board of Medicine

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

DATE AND TIME: Friday, October 7, 2022, 8:00 a.m. EST, or soon thereafter.

PLACE: The Westshore Grand, A Tribute Portfolio Hotel, 4860 West Kennedy Boulevard, Tampa, Florida 33609. The hotel's phone number is (813) 286-4400. The hotel's website is <https://www.marriott.com/en-us/hotels/tpagr-the-westshore-grand-a-tribute-portfolio-hotel-tampa>. The public rate is \$169 per night.

GENERAL SUBJECT MATTER TO BE CONSIDERED: General business of the Board. Board meetings may be canceled prior to the meeting date. Please check the Board's website at <https://flboardofmedicine.gov/meeting-information> for cancellations or changes to the meeting date or time or call the Board at (850) 245-4131 for more information.

A copy of the agenda may be obtained by contacting: <https://flboardofmedicine.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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131. 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: BOM.MeetingMaterials@flhealth.gov or by calling the Board at (850) 245-4131.

DEPARTMENT OF HEALTH

Division of Children's Medical Services

The Child Abuse Death Review Circuit 20 Committee *Revised* announces a public meeting to which all persons are invited.

DATE AND TIME: October 10, 2022, 12:30 p.m. – 12:45 p.m.

PLACE: Microsoft Teams Meeting Link:

https://gcc02.safelinks.protection.outlook.com/ap/t-59584e83/?url=https%3A%2F%2Fteams.microsoft.com%2F%2Fmeetup-join%2F19%253ameeting_ODlhM2FINmYtMDcyZi00MTM4LWlXZmItYjUxY2ZjOTI2Y2Ex%2540thread.v2%2F0%3Fcontext%3D%257b%2522Tid%2522%253a%2522a92008dd-d391-4c67-b9f7-a6b613b949e1%2522%252c%2522Oid%2522%253a%2522a87f22bb-ae63-4a57-b406-0edf0da80fff%2522%257d&data=05%7C01%7Crenee.senn%40flhealth.gov%7Ccafb656385be423a473508da90d89db4%7C28cd8f803c444b2781a0cd2b03a31b8d%7C0%7C0%7C637981557297372146%7CUnknown%7CTWFpbGZsb3d8eyJWJoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6I6k1haWwLjCjXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=MvzRsoKOLU1y%2BD27AXZuMvba7J%2FrNsmQmMJSg5ONuT4%3D&reserved=0

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Committee will address administrative issues, review cases, and discuss the CADR Action Plan. A portion of the meeting is required by Section 383.412(3) (a), F.S. to be closed to the public to allow the Committee to discuss information that is confidential and exempt from public meetings and public records. This portion of the meeting will be announced at the meeting.

A copy of the agenda may be obtained by contacting: fdonnorummo@sao.cjis20.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 7 days before the workshop/meeting by contacting: fdonnorummo@sao.cjis20.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).

For more information, you may contact: fdonnorummo@sao.cjis20.org

DEPARTMENT OF HEALTH

Division of Emergency Preparedness and Community Support

RULE NO.: RULE TITLE:

64J-1.024 Disciplinary Guidelines

The Department of Health, Division of Emergency Preparedness and Community Support, announces a workshop to which all persons are invited.

DATE AND TIME: October 17, 2022, 1:00 p.m. – 3:00 p.m., EST.

PLACE: Department of Health, 4042 Bald Cypress Way, Room 240 P, Tallahassee, Florida 32311

OR via Microsoft Teams using computer or mobile application (audiovisual):

https://teams.microsoft.com/l/meetup-join/19%3ameeting_M2Y5N2FiYjUtMmFIZS00ZjVjLWE3NmItM2FjMDAyN2I5ZmU1%40thread.v2/0?context=%7b%22Tid%22%3a%2228cd8f80-3c44-4b27-81a0-cd2b03a31b8d%22%2c%22Oid%22%3a%22560bd515-feec-4c4a-bbed-2412de0ddd52%22%7d

OR via web browser (audiovisual): meetme.flhealth.gov/webapp/?conference=1197346446@meetme.flhealth.gov

OR via telephone (audio only): +1 850-792-1375, conference ID 100 000 670#

GENERAL SUBJECT MATTER TO BE CONSIDERED: Disciplinary guidelines for the professions of Emergency Medical Technician (EMT) and paramedic; and for licensed Emergency Medical Services providers, and EMT and paramedic training programs.

A copy of the agenda may be obtained by contacting: Mike Hall, Mike.Hall@FlHealth.gov, (850) 245-4693, and at www.floridahealth.gov/licensing-and-regulation/ems-system/ems-rulemaking-notices/index.html.

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 10 days before the workshop/meeting by contacting: Mike Hall, Mike.Hall@FlHealth.gov, (850) 245-4693. 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).

DEPARTMENT OF HEALTH

Division of Public Health Statistics and Performance Management

The Florida Department of Health announces a public meeting to which all persons are invited.

DATE AND TIME: Tuesday, September 20, 2022, 11:00 a.m. – 12:00 p.m. Eastern

PLACE: Microsoft Teams Meeting:

Join on your computer or mobile app

Click here to join the meeting

Download Teams | Join on the web

Join with a video conferencing device

teams@meetme.flhealth.gov

Video Conference ID: 119 411 365 7

Alternate VTC instructions

Or call in (audio only)

+1 850-792-1375,,316550352# United States, Tallahassee

Phone Conference ID: 316 550 352#

Find a local number | Reset PIN

Learn More | Meeting options

GENERAL SUBJECT MATTER TO BE CONSIDERED:

Established in section 381.4018 Florida Statutes, the Physician Workforce Advisory Council advises the State Surgeon General and the Florida Department of Health on matters concerning current and future physician workforce needs in this state and reviews survey materials and the compilation of survey information.

A copy of the agenda may be obtained by contacting: Nathan Dunn at (850)245-4018.

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: : Nathan Dunn at (850)245-4018. 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: Nathan Dunn at (850)245-4018.

DEPARTMENT OF CHILDREN AND FAMILIES

Family Safety and Preservation Program

The Department of Children and Families announces a public meeting to which all persons are invited.

DATE AND TIME: September 16, 2022, 9:00 a.m. – 3:00 p.m. or until business has concluded

PLACE: Virtual via zoom

Register in advance for this meeting:

https://us06web.zoom.us/join/register/tZUvd-2orDMuGN3Nnt5D9MIEWMd4S3Cdv_q

GENERAL SUBJECT MATTER TO BE CONSIDERED: The purpose of this meeting is for the Independent Living Services Advisory Council (ILSAC) to conduct general business.

A copy of the agenda may be obtained by contacting: A more detailed agenda with relevant presentation material if available, will be posted on the department’s website, <https://www.myflfamilies.com/service-programs/independent-living/meeting-schedule.shtml>

For more information, you may contact: Cal Walton, III, 407-241-4712, cal.walton@myflfamilies.com

DEPARTMENT OF CHILDREN AND FAMILIES

Mental Health Program

The Department of Children and Families, Substance Abuse and Mental Health Program Office announces a public meeting to which all persons are invited.

DATE AND TIME: Wednesday, September 14, 2022, 4:00 p.m. – 5:00 p.m. EST

PLACE: Virtual meeting via Microsoft Teams. The access link is listed below and also available on the Department of Children and Families calendar of events located here: <https://www.myflfamilies.com/newsroom/public-events-meetings/>

https://teams.microsoft.com/dl/launcher/launcher.html?url=%2F_%23%2F1%2Fmeetup-join%2F19%3Ameeting_Zjm5YTQxNjMtOGQwNC00OTA3LWJkYzEtYWRIZTg3ZDMxZWMy%40thread.v%2F0%3Fcontext%3D%257b%2522Tid%2522%253a%2522f70dba48-b283-4c57-8831-cb411445a94c%2522%252c%2522Oid%2522%253a%25229251b7d2-1414-4b53-82ff-2a40dc98d569%2522%257d%26CT%3D1662566709649%26OR%3DOutlook-Body%26CID%3D5036E910-2BC9-401A-A50A-0D39C673AA9E%26anon%3Dtrue&type=meetup-join&deeplinkId=f943cff0-00cc-4f95-ac83-f5f44f872ee6&directDI=true&msLaunch=true&enableMobilePage=true&suppressPrompt=true

Call-in (audio only): 1-412-912-1530, Phone Conference ID: 161 836 128

GENERAL SUBJECT MATTER TO BE CONSIDERED: This is a report writing workshop for the Criminal Justice Subcommittee and is in accordance with Senate Bill 96 for the members of the Commission on Mental Health and Substance Abuse. The Commission is comprised of individuals appointed by the Governor, President of the Senate, and Speaker of the House. Discussion topics will include the current status of Florida’s behavioral health system of care and opportunities to further examine the current methods of providing mental health and substance use services in the state. Specifically, the group will confer on ways to better improve the effectiveness of

current practices, procedures, and programs, in providing such services; identify any barriers or deficiencies in the delivery of such services; and recommend changes to existing laws, rules and policies.

A copy of the agenda may be obtained by contacting: The agenda and meeting materials will be forth coming. For information on the Commission please visit the Commission website: <https://www.myflfamilies.com/service-programs/samh/commission/index.shtml>

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: Aaron Platt at Aaron.platt@myflfamilies.com or (850) 717-4331. 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: Aaron Platt at Aaron.platt@myflfamilies.com or (850) 717-4331.

DEPARTMENT OF FINANCIAL SERVICES

OIR – Insurance Regulation

The Florida Health Insurance Advisory Board (Board) announces a public meeting to which all persons are invited.

DATE AND TIME: September 15, 2022, 9:00 a.m.

PLACE: The meeting will be by teleconference. Members of the public who wish to listen in to the conference call are invited to listen in by calling 1(866)299-7949 and using Participant Code: 1433866#

GENERAL SUBJECT MATTER TO BE CONSIDERED: The Board will conduct the regular and general business of the organization, including a discussion of legislative proposals for 2023.

A copy of the agenda may be obtained by contacting: Jack McDermott at Fhiab2022@gmail.com or downloaded from the OIR website.

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: Fhiab2022@gmail.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).

For more information, you may contact: Jack McDermott at Fhiab2022@gmail.com

VHB

The The Florida Department of Transportation (FDOT) announces a workshop to which all persons are invited.

DATE AND TIME: Wednesday, October 12, 2022, 9:00 a.m. – 12:00 p.m. for the in-Person open house and 1:30 p.m. to 3:30 p.m. Eastern Standard Time (EST) for the virtual meeting.

PLACE: Beardall Senior Center 800 Delaney Avenue, Orlando, Florida 32801

GENERAL SUBJECT MATTER TO BE CONSIDERED: Project Description: Florida Department of Transportation District 5 Federal Transit Administration (FTA) Section 5310/5311/5339 Grant Workshop

The same content will be presented during the in-person open-house and virtual meeting. The open house format will allow public transit agencies and non-profits operating a transportation program an opportunity to learn how to prepare and submit grant applications for the below FTA grant programs:

- Section 5310 Enhanced Mobility of Seniors & Individuals with Disabilities
- Section 5311 Formula Grants for Rural Areas
- Section 5339 Bus and Bus Facilities

Other subjects will include:

- General Grant Requirements
- Triennial Review Process
- Procurement Processes

A copy of the agenda may be obtained by contacting: Brendan Guess, FDOT In-house Consultant, at 420 W. Landstreet Road, Orlando, FL 32824 by phone at 407-792-1635 or via email at Brendan.Guess@dot.state.fl.us.

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: Brendan Guess, FDOT In-House Consultant, at 420 W. Landstreet Road, Orlando, FL 32824 by phone at 407-792-1635 or via email at Brendan.Guess@dot.state.fl.us.

Public participation is solicited without regard to race, color, national origin, age, sex, religion, disability or family status. Persons wishing to express their concerns relative to FDOT compliance with Title VI may do so by contacting Jennifer Smith, FDOT District Five Title VI Coordinator, by email at Jennifer.Smith2@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: Brendan Guess, FDOT In-House Consultant at 407-792-1635 or via email at Brendan.Guess@dot.state.fl.us.

**Section VII
Notice of Petitions and Dispositions
Regarding Declaratory Statements**

DEPARTMENT OF HEALTH

Board of Psychology

NOTICE IS HEREBY GIVEN that the Board of Psychology has issued an order disposing of the petition for declaratory statement filed by Michael B. Spellman, Ph.D., on July 22, 2022. The following is a summary of the agency’s disposition of the petition:

On June 1, 2022, the Petitioner sought the agency’s opinion as to the applicability of Rule 64B19-18.004(4), F.A.C., as it applied to the petitioner. The petition has been withdrawn upon request of Petitioner. The Notice of Declaratory Statement was published in Vol.48/No.108, on June 3, 2022, in the Florida Administrative Register. No comments were received on the Petition.

A copy of the Order Disposing of the Petition for Declaratory Statement may be obtained by contacting: Allen Hall, Executive Director, Board of Psychology, 4052 Bald Cypress Way, Bin #C05, Tallahassee, Florida 32399-3253, Allen.Hall@flhealth.gov

**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**

STATE BOARD OF ADMINISTRATION

Request for Qualifications

The State Board of Administration is soliciting competitive responses from individuals to offer hydrological and hydraulic consulting services for the Florida Commission on Hurricane Loss Projection Methodology (Commission). The Request for Qualifications was issued on September 6, 2022, and is available on the Commission website at www.sbafla.com/methodology. The deadline for submitting a complete response is 5:00 p.m. ET on October 4, 2022.

DEPARTMENT OF FINANCIAL SERVICES

2223-04 ITB OIR Examination Services

The Department of Financial Services (Department) is issuing this Invitation to Bid (ITB) to solicit Responses from one or more entities (Respondents) that are qualified and capable of providing the examination of insurers authorized to do business in the State. The solicitation will be administered through the Vendor Information Portal (VIP). The submitted Response must comply with the terms and conditions stated in the ITB.

Point of Contact/Procurement Officer: All questions must be in writing and should reference the above solicitation number and title. Submit all questions to Procurement Officer, Edward Nabong, via email at DFSPurchasing@myfloridacfo.com.

Response Due Date: 9/19/2022 by 3:00 p.m. ET, to the Procurement Officer identified, at the following email address: DFSPurchasing@myfloridacfo.com.

The Department reserves the right to issue amendments, addenda, and changes to the timeline and specifically to any public meeting identified within the solicitation. The Department will post notice of any changes regarding this solicitation or additional meetings within the VBS in accordance with Section 287.042(3), Florida Statutes, and will

not re-advertise the notice in the Florida Administrative Register (FAR). To access the VBS go to the following web address: http://vbs.dms.state.fl.us/vbs/main_menu.

ADA Requirements: Pursuant to the provisions of the Americans with Disabilities Act, any person requiring special accommodations to participate in any meeting is asked to advise the agency at least 48 hours before the meeting by contacting: Procurement Officer – see above. 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).

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., Wednesday, August 31, 2022 and 3:00 p.m., Wednesday, September 7, 2022.

Rule No.	File Date	Effective Date
5L-3.007	9/6/2022	9/26/2022
6A-1.0018	8/31/2022	9/20/2022
6A-1.094125	8/31/2022	9/20/2022
6A-1.094224	8/31/2022	9/20/2022
6A-4.002	8/31/2022	9/20/2022
6A-4.004	8/31/2022	9/20/2022
6A-4.0012	8/31/2022	9/20/2022
6A-6.0573	8/31/2022	9/20/2022
6A-6.0574	8/31/2022	9/20/2022
6A-6.0576	8/31/2022	9/20/2022
6A-6.0981	8/31/2022	9/20/2022
6A-6.0982	8/31/2022	9/20/2022
6A-6.03027	8/31/2022	9/20/2022
6A-10.024	8/31/2022	9/20/2022
6A-10.085	8/31/2022	9/20/2022
6A-10.0351	8/31/2022	9/20/2022
6A-10.0352	8/31/2022	9/20/2022
6A-14.092	8/31/2022	9/20/2022
6A-14.0302	8/31/2022	9/20/2022
6A-20.045	8/31/2022	9/20/2022
6M-8.615	8/31/2022	9/20/2022
6M-8.620	8/31/2022	9/20/2022
6M-8.621	8/31/2022	9/20/2022

25-22.002	9/7/2022	9/27/2022
25-22.100	9/7/2022	9/27/2022
25-22.101	9/7/2022	9/27/2022
25-22.1035	9/7/2022	9/27/2022
25-22.104	9/7/2022	9/27/2022
25-22.105	9/7/2022	9/27/2022
25-22.107	9/7/2022	9/27/2022
25-22.033	9/7/2022	9/27/2022
25-25.001	9/7/2022	9/27/2022
25-25.002	9/7/2022	9/27/2022
25-25.003	9/7/2022	9/27/2022
25-25.004	9/7/2022	9/27/2022
25-25.005	9/7/2022	9/27/2022
25-25.006	9/7/2022	9/27/2022
25-25.007	9/7/2022	9/27/2022
25-25.008	9/7/2022	9/27/2022
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25-25.010	9/7/2022	9/27/2022
25-25.011	9/7/2022	9/27/2022
25-25.012	9/7/2022	9/27/2022
25-25.013	9/7/2022	9/27/2022
25-25.014	9/7/2022	9/27/2022
25-25.015	9/7/2022	9/27/2022
25-25.016	9/7/2022	9/27/2022
25-25.017	9/7/2022	9/27/2022
25-25.018	9/7/2022	9/27/2022
25-25.019	9/7/2022	9/27/2022
25-25.020	9/7/2022	9/27/2022
25-25.021	9/7/2022	9/27/2022
25-25.022	9/7/2022	9/27/2022
25-25.023	9/7/2022	9/27/2022
25-25.024	9/7/2022	9/27/2022
25-25.025	9/7/2022	9/27/2022
25-25.030	9/7/2022	9/27/2022
61G10-11.011	9/2/2022	9/22/2022
61G10-12.001	9/2/2022	9/22/2022
61G10-15.003	9/2/2022	9/22/2022
61N-1.006	9/2/2022	9/22/2022
61N-1.009	9/2/2022	9/22/2022
61N-1.022	9/2/2022	9/22/2022
64B5-2.013	9/2/2022	9/22/2022

64B5-2.0135	9/2/2022	9/22/2022
64B33-5.002	9/1/2022	9/21/2022
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
5K-4.020	12/10/2021	**/**/*****
5K-4.035	12/10/2021	**/**/*****
5K-4.045	12/10/2021	**/**/*****
60FF1-5.009	7/21/2016	**/**/*****
62-6.001	5/10/2022	**/**/*****
62-600.405	11/16/2021	**/**/*****
62-600.705	11/16/2021	**/**/*****
62-600.720	11/16/2021	**/**/*****
64B8-10.003	12/9/2015	**/**/*****
65C-9.004	3/31/2022	**/**/*****
69L-7.020	10/22/2021	**/**/*****
64B8-10.003	12/9/2015	**/**/*****

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Division of Motor Vehicles

Establishment of Mondial Motor USA II, Inc., line-make DONF

Notice of Publication for a New Point

Franchise Motor Vehicle Dealer in a County of More than 300,000 Population

Pursuant to Section 320.642, Florida Statutes, notice is given that Triple J Import Inc., intends to allow the establishment of Mondial Motor USA II, Inc., as a dealership for the sale of motorcycles manufactured by Ningbo Dongfang Lingyun Vehicle (line-make DONF) at 3820 Northwest 135th Street Bay M, Opa Locka, (Miami-Dade County), Florida 33054, on or after October 8, 2022.

The name and address of the dealer operator(s) and principal investor(s) of Mondial Motor USA II, Inc., are dealer operator(s): Gustavo Fernandez, 3820 Northwest 135th Street, Opa Locka, Florida 33054; principal investor(s): Diego Fernandez, 3820 Northwest 135th St Unit L, Opa Locka, Florida 33054.

The notice indicates intent to establish the new point location in a county of more than 300,000 population, according to the latest population estimates of the University of Florida, Bureau of Economic and Business Research.

Certain dealerships of the same line-make may have standing, pursuant to Section 320.642, Florida Statutes, to file a petition or complaint protesting the application.

Written petitions or complaints must be received by the Department of Highway Safety and Motor Vehicles within 30 days of the date of publication of this notice and must be submitted to: Sondra L. Howard, Administrator, Dealer License Section, Department of Highway Safety and Motor Vehicles, Room A-312, MS65, Neil Kirkman Building, 2900 Apalachee Parkway, Tallahassee, Florida 32399-0635.

A copy of such petition or complaint must also be sent by US Mail to: Guang Cheng Shen, Triple J Import Inc., 6654-A Jimmy Carter Boulevard, Peachtree Corners, Georgia 30071.

If no petitions or complaints are received within 30 days of the date of publication, a final order will be issued by the Department of Highway Safety and Motor Vehicles approving the establishment of the dealership, subject to the applicant's compliance with the provisions of Chapter 320, Florida Statutes.

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Division of Motor Vehicles

Establishment of Mondial Motor USA II, Inc., line-make ZHNG

Notice of Publication for a New Point

Franchise Motor Vehicle Dealer in a County of More than 300,000 Population

Pursuant to Section 320.642, Florida Statutes, notice is given that Triple J Import Inc., intends to allow the establishment of Mondial Motor USA II, Inc., as a dealership for the sale of motorcycles manufactured by Taizhou Zhongneng Motorcycle Co.Ltd (line-make ZHNG) at 3820 Northwest 135th Street, Bay M, Opa Locka, (Miami-Dade County), Florida 33054, on or after October 8, 2022.

The name and address of the dealer operator(s) and principal investor(s) of Mondial Motor USA II, Inc., are dealer operator(s): Gustavo Fernandez, 3820 Northwest 135th Street, Opa Locka, Florida 33054; principal investor(s): Diego Fernandez, 3820 Northwest 135th Street Unit L, Opa Locka, Florida 33054.

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If no petitions or complaints are received within 30 days of the date of publication, a final order will be issued by the Department of Highway Safety and Motor Vehicles approving the establishment of the dealership, subject to the applicant's compliance with the provisions of Chapter 320, Florida Statutes.

EXECUTIVE OFFICE OF THE GOVERNOR
Division of Emergency Management
Hazard Mitigation Grant Program Notice of Funding Availability

Program Summary

The Florida Division of Emergency Management (the Division or FDEM) is pleased to announce the availability of the Hazard Mitigation Grant Program (HMGP) Post-Fire, authorized by Section 20602 of the Bipartisan Budget Act of 2018. The incident period includes those counties that have been declared for a Fire Management Assistance (FMA) between the dates of March 4, 2022 through March 6, 2022. The State of Florida received two FMA declarations during this time period: FM-5424 (1707 Adkins Ave), and FM-5426 (Chipola Fire Complex). The State of Florida was awarded a flat amount of HMGP funding per declaration (\$1,048,736.00), which was then aggregated into one HMGP Post-Fire declaration, FM-5424-FL.

Eligible project types are the same as HMGP, although FEMA encourages the use of these funds for the mitigation of wildfire and related hazards, such as flood or erosion. Please note that projects will be funded in the order listed in their county's endorsement letter, regardless of project type.

The projects may take place outside of the declared county, or counties, so long as the risk reduction benefits the declared county or counties. If funding cannot be used in these declared counties, then it will be made available to the rest of the state.

Current Changes

The Division will be using the FDEM Portal for the HMGP process. Applications are currently being accepted through the

FDEM Portal and doing so **does not** require an additional hardcopy submission. Hardcopy applications are permitted pursuant to the Rule 27P-22, Florida Administrative Code; however, **the Division highly encourages all applications to solely be uploaded through the FDEM Portal.** If an applicant chooses to submit a hard copy of their application, a digital submission through the FDEM Portal is strongly advised as processing and project management will be done through this system.

If you've been granted access to the FDEM Portal for a past event, please use your existing account and do not re-register. If you have problems accessing your account, please use the FDEM Portal contact below.

Application Timeline

The application period will close December 2, 2022. The Division encourages potential applicants to submit complete applications before the close of the application period. Applications will only be accepted from eligible applicants as defined in the *Minimum Program Eligibility* section of this notice.

FDEM Portal Submission: If you have not already registered for access to the FDEM Portal, please see the instructions in *Attachment H* to do so. The information required for submitting a complete application through the FDEM Portal is the same as the State of Florida HMGP Application (*Attachment F*), which can be used as reference to collect all the information necessary for your project prior to submittal. If an application is submitted through the FDEM Portal, no hardcopies will be required.

A complete digital submission of your applications, and all necessary supporting documentation, must be uploaded to the FDEM Portal no later than

December 2, 2022, 11:59 p.m. (EST)

It is imperative that your access request for the FDEM Portal is received by the Division no later than 5:00 p.m. EST on December 2, 2022 in order to meet the application deadline.

Hardcopy Filing: If a hardcopy is filed, please provide just one original of the State of Florida HMGP Application and all appropriate attachments. In addition, submit your project(s) and all relevant documentation to the FDEM Portal using the directions detailed above and in *Attachment H*.

A complete digital submission of your applications, and all necessary supporting documentation, must be uploaded to the FDEM Portal no later than

December 2, 2022 11:59 p.m. (EST)

It is imperative that your access request for the FDEM Portal is received by the Division no later than 5:00 p.m. EST on December 2, 2022 in order to meet the application deadline.

Any hardcopy applications sent by mail or other carrier to the Division must be postmarked on or before **December 2, 2022**. Hand-delivered applications must be stamped in at the Division no later than **5:00 p.m. EST on December 2, 2022**.

Questions regarding the FDEM Portal system may be directed to: Jared Jaworski (850)544-8372, Jared.jaworski@em.myflorida.com

Any completed hardcopy applications must be sent to the following address:

ATTN: Kathleen Marshall, Hazard Mitigation Grant Program
Florida Division of Emergency Management, Mitigation Bureau, 2555 Shumard Oak Boulevard Tallahassee, Florida 32399-2100

Minimum Program Eligibility

Eligible Applicants: According to the Code of Federal Regulations (CFR) 44 §206.434(a), the following parties are eligible to apply for Hazard Mitigation Grant Program funds:

- State and local governments who have an approved Local Mitigation Strategy (LMS) in accordance with 44 CFR §201.6, prior to receipt of HMGP subgrant funding for projects;
- Private non-profit organizations or institutions that own or operate a private non-profit facility as defined in §206.221(e); and
- Indian tribes or authorized tribal organizations.

However, be advised that pursuant to Rule 27P-22, Florida Administrative Code, all project applications must go through the Local Mitigation Strategy Working Group (LMSWG) of the county where the project will take place. Any application sent to the Division without a signed endorsement letter, from either the Chair or Vice-Chair of an LMSWG, will be denied.

Eligible Activities: Activities include mitigation projects that will result in protection of public or private property from natural hazards. Activities for which implementation has already been initiated or completed are not eligible for funding. Eligible projects include, but are not limited to, the following:

- Acquisition or relocation of hazard-prone structures;

- Retrofitting of existing buildings and facilities that will result in increased protection from hazards;
- Elevation of flood-prone structures;
- Infrastructure protection measures;
- Stormwater management improvements;
- Minor structure flood control;
- Flood diversion and storage;
- Aquifer storage and recovery;
- Floodplain and stream restoration;
- Residential and community safe room construction; and/or
- Generators for a critical facility, provided they are cost-effective, contribute to a long-term solution to the problem that they are intended to address, and meet other project eligibility criteria as required by 44 CFR §206.434(c); or generators that are an integral part of a larger eligible project.

Ineligible Activities: The state will **not** consider funding requests for the following:

- Construction of new facilities (Nevertheless, the cost associated with above-code upgrades to new facilities may be considered);
- Equipment such as emergency pumps, vehicles, and communication devices;
- Stand-alone studies, design, and planning-related activities;
- Tree removal, debris removal, and other forms of maintenance; or
- **Projects already in progress** (*Construction may not begin until the contract between the State and subrecipient is executed and the project has met requirements of the National Environmental Policy Act*).

Eligibility Criteria: All projects submitted must meet *minimum criteria* to be considered for funding. An eligible project must:

- Conform to the requirements stated in this Notice of Funding Availability;
- Conform to the Florida State Hazard Mitigation Plan and the respective community's LMS;
- Conform to the funding priorities for the disaster, as established in the appropriate LMS;
- Demonstrate cost-effectiveness;
- Be technically feasible;
- Benefit the designated disaster area;
- Conform to all applicable environmental laws and regulations, as well as Executive Orders;
- Solve a problem independently or constitute a functional part of a solution;

- Benefit a National Flood Insurance Program (NFIP) participating community that is not on probation or suspended from the NFIP; and
- Meet all applicable State and local codes and standards.

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Cost-Share Requirements

Under the HMGP, FEMA will contribute up to 75-percent of the total amount approved under the grant award to implement eligible, cost-effective mitigation measures. The applicant must provide the remaining 25-percent non-federal share. Contributions, cash, and in-kind services are acceptable as part of the non-federal share. Requirements for in-kind contributions can be found in 2 CFR §200.306. In-kind contributions must be directly related to the eligible project cost and are those personnel, materials, equipment and supplies owned, controlled, and operated by the applicant or a third-party contributor.

Applicants may use the Global Match concept as part of the 25-percent non-federal share. Global Match permits a potential applicant to meet the non-federal share match by receiving credit for state and/or local government funds that were committed to a similar type of project(s). These similar, **non-federally** funded projects must meet all of the HMGP eligibility requirements. This means that if Global Match is approved, the applicant may receive up to 100-percent federal share.

Pre-Award Costs

Prior to receiving a grant award, pre-award costs may be requested. Pre-award costs include items such as engineering, environmental study, permitting, and other "soft" costs associated with a construction project. *Construction activities are not considered pre-award costs.* Pre-award costs must be requested in writing. Guidelines for pre-award costs are included in Attachment A.

Procurement

Any procurement of property or services under a federal award must conform to 2 CFR §200 Subpart D (§§ 200.317 - 200.326). This also includes any activities performed as a part of the pre-award request.

Sub-Recipient Management Costs

Per FEMA Hazard Mitigation Grant Program Interim Policy 104-11-1, HMGP projects awarded under disasters, on or after

the effective date, are eligible for sub-recipient management costs (SRMC) up to a hard cap of 5 percent of their eligible and actual project costs. SRMC is a separate pool of funding and will not be calculated as part of the benefit-cost analysis (BCA). SRMC will be reimbursed at a 100 percent federal cost share following the submission of compliant source documentation in conformance with 2 CFR 200 Subpart E. Additional information on SRMC can be found in the attached application (Attachment F) and the HMGP SRMC Request Form (Attachment G). Any applicant requesting SRMC will need to submit Attachment G along with their application.

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County Funding Allocation

Funding under HMGP Post-Fire is based on a national aggregate calculation based on an average of historical Fire Management Assistance designations from the last 10 years.

Funding from multiple events are aggregated into one grant under the first declaration. For FM-5424, there were three, FM-5424 (Bay County), and FM-5426 (Bay and Calhoun County). The state will divide the aggregated funding amounts evenly among the declared counties. The lock-in allocation can be found on Attachment B.

HMGP Post-Fire funding is available only to those counties that have a current FEMA-approved LMS. Project applications will be considered only if:

- (1) The application is accompanied by an endorsement by the LMS Chairperson or Vice-Chairperson stating that the project is included in the current LMS; and,
- (2) If more than one project is submitted, the endorsement indicates the prioritization. A sample project submission letter is provided on Attachment C.

Technical Assistance

The Division is in the process of scheduling HMGP application development workshop webinars. The webinars will focus on the declared counties so that their project-specific concerns can be addressed by state staff. The Division is in the process of scheduling these webinars and will be in touch with these counties in the next few weeks to finalize dates and times.

Please check the Division's website www.floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program for additional technical guidance. The Division will provide technical assistance throughout the application

process. This includes assistance with the application process, Benefit Cost Analysis, Engineering Feasibility and Environmental/Historical Preservation Compliance. If there are any questions regarding the allocation of funds or the project review and selection criteria, please call Bureau staff at one of the following numbers:

Program Eligibility: (850)815-4537 or (850)815-4503
 Environmental: (850)815-4582
 Engineering and Technical Feasibility: (850)528-5713

For additional information and technical assistance, please refer to FEMA’s *Hazard Mitigation Assistance Guidance* document available at <https://www.fema.gov/media-library/assets/documents/103279>.

To assist you in submitting qualified project applications, the following attachments are located on the Division website <https://www.floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/>:

- 6
- Attachment A: Pre-award Cost Guidance and Form*
- Attachment B: Lock-in Amount of Available HMGP*
- Attachment C: Sample LMS Project Submission Letter*
- Attachment D: Florida Administrative Code 27P-22*
- Attachment E: Data Collection Worksheet Notice*
- Attachment F: HMGP Application*
- Attachment G: HMGP SRMC Request Form*
- Attachment H: FDEM Portal Access Request and Guidance*

7
Attachment A

Pre-Award Cost Guidance and Request Form

If you wish to request pre-award costs with your project, or would like to know more about them, follow the link below and look under the “Application” menu for both the guidance and request form.
<https://floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/>

Questions regarding pre-award costs may be directed to:
 Jared Jaworski (850)544-8372
Jared.jaworski@em.myflorida.com

Attachment B

HMGP Post-Fire FM-5424-FL Allocation

County	Regular HMGP Funding (75%)	Project Match (25%)	Required
Bay	\$1,573,104.00	\$524,368.00	
Calhoun	\$524,368.00	\$174,789.33	
	\$2,097,472.00	\$699,157.33	

Attachment C

(On agency letterhead)

Date

Mrs. Laura Dhuwe, State Hazard Mitigation Officer
 Florida Division of Emergency Management
 2555 Shumard Oak Boulevard Tallahassee, Florida 32399-2100
 Re: Hazard Mitigation Grant Program (HMGP) applications for FM-5424-FL, Post-Fire

Dear Mrs. Dhuwe:
 The County Local Mitigation Strategy (LMS) working group has approved by vote and prioritized the following projects for HMGP funding from this disaster. These projects align with our LMS goals and objectives as noted, and with the State’s mitigation goals and objectives {in accordance with the Code of Federal Regulations 44 §201.6).

The County LMS group therefore presents the projects below (or in the attachment) in the order that they are to be considered for funding.

FM-5424-FL Post Fire

For further information or inquiry, please contact me at (insert phone number and email). Sincerely,

, LMS Chair
 , County LMS

cc:

Attachment D
CHAPTER 27P-22
HAZARD MITIGATION GRANT PROGRAM

- 27P-22.001 Purpose
- 27P-22.002 Definitions
- 27P-22.003 Eligibility
- 27P-22.004 LMS Working Groups
- 27P-22.005 Local Mitigation Strategy
- 27P-22.006 County Allocations and Project Funding
- 27P-22.007 Application

27P-22.001 Purpose.

This chapter describes the processes for application, project selection and distribution of funds under the Hazard Mitigation Grant Program.

Rulemaking Authority 252.35(2)(x) FS. Law Implemented 252.311, 252.32, 252.35 FS. History—New 2-24-02, Formerly 9G-22.001.

27P-22.002 Definitions.

- (1) "Adoption" means a resolution, ordinance or other formal action taken by the governing body of a county or municipality indicating agreement with and acceptance of the relevant Local Mitigation Strategy.
- (2) "Application" means the request for hazard mitigation funding as submitted to the Division of Emergency Management (Division or FDEM) by an Applicant.
- (3) "Applicant" means a state agency, local government, Native American tribe or authorized tribal organization or private non-profit organization requesting hazard mitigation funding.
- (4) "DHS" means Department of Homeland Security.
- (5) "FEMA" means the Federal Emergency Management Agency.
- (6) "Hazard" means a condition that exposes human life or property to harm from a man-made or natural disaster.
- (7) "Hazard Mitigation" means any action taken to reduce or eliminate the exposure of human life or property to harm from a man-made or natural disaster.
- (8) "Hazard Mitigation Grant Program", herein referred to as HMGP, means the program authorized under Section 404 of the Stafford Act and implemented by 44 C.F.R., Part 206, Subpart N, dated October 1, 2019, hereby incorporated by reference, <http://www.flrules.org/Gateway/reference.asp?No=Ref-12333>, a copy of which may be obtained by contacting the Division, which provides funding for mitigation projects as identified in the State Hazard Mitigation Plan.
- (9) "Local Mitigation Strategy" or "LMS" means a plan to reduce identified hazards within a county.
- (10) "Project" means a hazard mitigation measure as identified in an LMS.
- (11) "Repetitive loss structures" means structures that have suffered two or more occurrences of damage due to flooding and which have received payouts from the National Flood Insurance Program as a result of those occurrences.
- (12) "State Hazard Mitigation Plan" means Florida's version of the Hazard Mitigation Plan referred to in 44 C.F.R., Part 206, Subpart N and approved by FEMA. The State Hazard Mitigation Plan is set forth in the Enhanced State Hazard Mitigation Plan 2018, hereby incorporated into this rule by reference, <https://www.flrules.org/gateway/reference.asp?NO=Ref-12334>. A copy may be obtained by contacting the Division of Emergency Management.
- (13) "Working Group" is the group responsible for the development and implementation of the Local Mitigation Strategy.

Rulemaking Authority 252.35(2)(x) FS. Law Implemented 252.311, 252.32, 252.35 FS. History—New 2-24-02, Formerly 9G-22.002, Amended 7-18-13, 11-24-20.

27P-22.003 Eligibility.

- (1) Eligible types of projects shall include, but not be limited to, the following:
- Certain new construction activities that will result in protection from hazards;
 - Retrofitting of existing facilities that will result in increased protection from hazards;
 - Elevation of flood prone structures;
 - Vegetative management/soil stabilization;
 - Infrastructure protection measures;
 - Stormwater management/flood control projects;
 - Property acquisition or relocation; and
 - Plans that identify and analyze mitigation problems and include funded, scheduled programs for implementing solutions, within the same disaster.
- (2) In order to be eligible for funding, projects shall meet the following requirements:
- Conform to the State Hazard Mitigation Plan;
 - Conform to the funding priorities for the disaster as established in the LMS governing the project;
 - Conform to the following federal regulations incorporated by reference, copies of which may be obtained by contacting the Division:
 - 44 C.F.R., Part 9, Floodplain Management and Protection of Wetlands, dated October 1, 2019, incorporated by reference, <http://www.flrules.org/Gateway/reference.asp?No=Ref-12335>;
 - DHS Directive 023-01, Revision 01, dated 10/31/2014, incorporated by reference, <http://www.flrules.org/Gateway/reference.asp?No=Ref-12336>;
 - DHS Instruction 023-01-001-01, Revision 01, dated 11/6/2014, incorporated by reference, <http://www.flrules.org/Gateway/reference.asp?No=Ref-12337>;
 - FEMA Directive 108-1, dated 10/10/2018, incorporated by reference, <http://www.flrules.org/Gateway/reference.asp?No=Ref-12338>; and
 - FEMA Instruction 108-1-1, dated 10/10/2018, incorporated by reference, <http://www.flrules.org/Gateway/reference.asp?No=Ref-12339>.
 - Eliminate a hazard independently or substantially contribute to the elimination of a hazard where there is reasonable assurance that the project as a whole will be completed; and
 - Be cost-effective and substantially reduce the risk of future damage, hardship, loss, or suffering resulting from a disaster.

Rulemaking Authority 252.35(2)(x) FS. Law Implemented 252.311, 252.32, 252.35 FS. History—New 2-24-02, Formerly 9G-22.003, Amended 11-24-20.

27P-22.004 LMS Working Groups.

Each county electing to participate in the HMGP must have a formal LMS Working Group and a current FEMA approved LMS.

- (1) Not later than the last working weekday of January of each year the Chairperson of the Board of County Commissioners shall submit to the Division a list of the members of the Working Group and its designated Chairperson and Vice-Chairperson.
- (2) The Working Group shall include, at a minimum:
 - (a) Representation from various agencies of county government which may include, but not be limited to, planning and zoning, roads, public works and emergency management;
 - (b) Representation from all interested municipalities within the county; and
 - (c) Representation from interested private organizations, civic organizations, trade and commercial support groups, property owners associations, Native American Tribes or authorized tribal organizations, water management districts, regional planning councils, independent special districts and non-profit organizations.
- (3) The county shall submit documentation to show that within the preceding year it has issued a written invitation to each municipality, private organization, civic organization, Native American Tribe or authorized tribal organization, water management district, independent special district and non-profit organization, as applicable, to participate in the LMS working group. This documentation shall accompany the membership list submitted to the Division.
- (4) The Working Group shall have the following responsibilities:
 - (a) To designate a Chairperson and Vice-Chairperson;
 - (b) To develop and revise an LMS as necessary;
 - (c) To coordinate all mitigation activities within the County;
 - (d) To set an order of priority for local mitigation projects; and
 - (e) To submit annual LMS updates to the Division by the last working weekday of each January. Updates shall address, at a minimum:

- 1. List of Working Group Members including Chair and Vice-Chair;
- 2. Changes to the hazard assessment;
- 3. Updated project priority list including estimated costs and potential funding sources;
- 4. Changes to the critical facilities list;
- 5. Changes to the repetitive loss list; and

6. Revisions to any maps.

Rulemaking Authority 252.35(2)(x) FS. Law Implemented 252.311, 252.32, 252.35 FS. History—New 2-24-02, Formerly 9G-22.004, Amended 7-18-13, 11-24-20.

27P-22.005 Local Mitigation Strategy.

Each LMS shall have the following components:

- (1) A description of the activities of local government and private organizations that promote hazard mitigation; a description of the policies, ordinances or programs that guide those activities; and any deficiencies in the policies, ordinances, and programs with recommendations to correct those deficiencies.
- (2) A description of the methods used to engage private sector participation.
- (3)) A statement of general mitigation goals, with Working Group recommendations for implementing these goals, and estimated dates for implementation.
- (4) A description of the procedures used by the Working Group to review the LMS at regular intervals to ensure that it reflects current conditions within the County.
- (5) A hazard assessment to include, at the minimum, an evaluation of the vulnerability of structures, infrastructure, special risk populations, environmental resources and the economy to storm surge, high winds, flooding, wildfires and any other hazard to which the community is susceptible.
- (6) A statement of procedures used to set the order of priority for projects based on project variables which shall include technical and financial feasibility.
- (7) A list of approved projects in order of priority with estimated costs and associated funding sources.
- (8) A list of critical facilities that must remain operational during and after a disaster.
- (9) A list of repetitive loss structures.
- (10) Maps, in Geographical Information System (GIS) format, depicting hazard areas, project locations, critical facilities and repetitive loss structures.

Rulemaking Authority 252.35(2)(x) FS. Law Implemented 252.311, 252.32, 252.35 FS. History—New 2-24-02, Formerly 9G-22.005.

27P-22.006 County Allocations and Project Funding.

- (1) The available HMGP funds shall be allocated to the counties included in the relevant presidential disaster declaration, as defined in Section 252.34(2), F.S., in proportion to each county’s share of the federal disaster funding from the Public Assistance, Individual Assistance and Small Business Administration programs as of 120 days after the disaster declaration as reported by FEMA.

(a) Eligible and submitted projects for each county included in the relevant presidential disaster declaration will be funded in order of priority as outlined in the LMS Working Group endorsement letter until the allocated funds are exhausted, or all eligible projects are funded, whichever occurs first.

(b) Any allocation remaining after all eligible projects in any declared county are funded shall be reallocated to those counties included in the relevant presidential disaster declaration whose allocation was not sufficient to fund all submitted eligible projects in proportion to each county's share of unfunded projects.

(2) If funds remain after all eligible projects under subsection (1) above have been funded, then they shall be applied to fund eligible projects submitted from counties not included in the relevant presidential disaster declaration on a first-come-first-served basis until all available funds are obligated.

(3) Once a project has been selected for funding, the agreement between the applicant and the Division regarding the terms and conditions of the grant shall be formalized by contract.

Rulemaking Authority 252.35(2)(x) FS. Law Implemented 252.311, 252.32, 252.35 FS. History—New 2-24-02, Formerly 9G-22.006, Amended 11-

24-20.

27P-22.007 Application.

(1) The following entities may apply for funding under the program:

(a) State agencies and local governments;
 (b) Private non-profit organizations or institutions that own or operate a private non-profit facility as defined in 44 C.F.R., §206.221(e), dated October 1, 2019, hereby incorporated by reference,

<http://www.flrules.org/Gateway/reference.asp?No=Ref-12340> a copy of which may be obtained by contacting the Division; and

(c) Indian tribes or authorized tribal organizations.

(2) The Division shall notify potential applicants of the availability of HMGP funds by publishing a Notice of Funding Availability in the Florida Administrative Register.

(3) Applicants will have not less than ninety (90) days from the date of notification to submit project applications. The opening and closing dates will be specified in the Notice of Funding Availability. Applications mailed to the Division must be postmarked on or before the final due date. Hand-delivered applications must be stamped in at the Division no later than 5:00 p.m. (Eastern Time) on the final due date.

(4) A LMS Working Group endorsement letter shall accompany each application from the Chairperson or Vice-Chairperson of the LMS Working Group endorsing the project. The endorsement shall verify that the proposed project does appear

in the current LMS and state its priority in relation to other submitted projects. Applications without this letter of endorsement will not be considered.

(5) Applications must be submitted using FDEM Form No. HMGP Application (01-2020) (Eff. 01-2020) which is incorporated into this rule by reference, <http://www.flrules.org/Gateway/reference.asp?No=Ref-12341>, a copy of which may be obtained by contacting the Division or visiting www.floridadisaster.org. In addition, the application form will be circulated as a part of the Notice of Funding Availability for its respective disaster grant cycle.

(6) If the Division receives an incomplete application, the applicant will be notified in writing of the deficiencies. The applicant will have thirty (30) calendar days from the date of the letter to resolve the deficiencies. If the deficiencies are not corrected by the deadline the application will not be considered for funding.

(7) Applications are to be delivered or sent to: Division of Emergency Management

Bureau of Mitigation

2555 Shumard Oak Boulevard Tallahassee, Florida 32399

ATTENTION: Hazard Mitigation Grant Program

Rulemaking Authority 252.35(2)(x) FS. Law Implemented 252.311, 252.32, 252.35 FS. History—New 2-24-02, Formerly 9G-22.007, Amended 7-18-

13, 11-24-20.

Attachment E

Data Collection Worksheet Notice

If you are submitting project applications for the project types listed below, follow the link and look under “Project Worksheets” for the form pertaining to your project. These worksheets will help ensure that the appropriate information is given to the state and assist us in reviewing your application more efficiently.

Project Worksheets

- Wind Retrofit
- Flood Control- Drainage Improvement
- Generator
- Hurricane Safe Rooms
- Tornado Safe Rooms
- Wildfire
- Drought
- Utility Mitigation

In addition, a new worksheet was developed to assist sub-applicants submitting acquisition-related projects. To find this

document, follow the same link and look under “For Acquisition Projects.”

<https://floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/>

Attachment F

THIS SECTION FOR STATE USE ONLY	
FEMA- -DR-FL Standard HMGP 5% Application Initiative Application Initial Submission or Complete Re-Support Documents Eligible Applicant Submission Conforms w/ State 409 Plan State or Local Project Type(s) Government Wind Flood In Declared Area Private Non-Profit (Tax Other: ID Received) Statewide Recognized Indian Tribe or Tribal Organization	
Community NFIP Status: (Check all that apply) LMS Ranking:	
Participating County:	
In Good Standing CRS Non-Participating State Application ID:	(TIME-DATE STAMP HERE)

This application is for all Federal Emergency Management Agency (FEMA Region IV) Hazard Mitigation Grant Program (HMGP) proposals. Complete ALL sections and provide the documents requested. If you require technical assistance, contact the Florida Division of Emergency Management at DEM_HazardMitigationGrantProgram@em.myflorida.com.

Section I – Applicant

A. Applicant Instruction: Complete all sections that correspond with the type of proposed project

This application is for all Federal Emergency Management Agency (FEMA Region IV) Hazard Mitigation Grant Program (HMGP) proposals. Complete ALL sections and provide the documents requested. If you require technical assistance, contact the Florida Division of Emergency Management at DEM_HazardMitigationGrantProgram@em.myflorida.com.

Section I – Applicant

A. Applicant Instruction: Complete all sections that correspond with the type of proposed project

Application All Applicants must complete these

Environmental Maintenance Agreement:	All Applicants must complete these Any Applications involving public property, public ownership, or
Flood Control Drainage Improvement Generator Tornado Room Worksheet: Hurricane Wind Retrofit Wildfire Worksheet: Drought Utility Mitigation Worksheet Request for Public Assistance Form: Acquisition Forms:	–Acquisition, Elevation, Dry Flood Proofing, Drainage Improvements, Flood Control Measures, Floodplain and Stream Permanent, portable generators, and SafeNew Safe Room, Retrofit of existing structure, Community Safe Room, SafeNew Safe Room, Retrofit of existing Wind Retrofit projects only – one worksheet Defensible Space, Hazardous Fuels Reduction, Ignition Resistant Aquifers, other Upgrades to sewer systems, upgrading electrical components for a utility, FEMA Form 90-49 (Request for Public Assistance): All applicants must complete, If project type is Acquisition, these forms must be completed. (Only one of the two Notice of Voluntary Interest forms is necessary.) Model Statement of Assurances for Property Acquisition Projects Declaration and Release Notice of Voluntary Interest (Town Hall

Application Completeness All applicants are recommended to complete this checklist and utilize the 1

27P-22-.007 F.A.C FDEM Form No. HMGP Application (01-2020) (Eff. 01-2020)

B. Applicant Information:

FEMA- -DR-FL DISASTER NAME:

Title of Project:

1. Applicant (Organization):
2. Applicant Type: State or Local Government Native American Tribe Private Non-Profit Special District
3. County:
4. State Legislative Senate District(s): ; State Legislative House District(s): ; Congressional House District(s):
5. Federal Tax I.D. Number:
6. Data Universal Numbering System (DUNS):
7. Federal Information Processing Standards (FIPS) Code*: (*if your FIPS code is not known, see guidance)
8. National Flood Insurance Program (NFIP) Community Identification Number: (this number can be obtained from the FIRM map for your area)

9. **Point of Contact:** (Applicant staff serving as the coordinator of project)

Ms. Mr. First Name: Las t Name:
 Title:
 Address:
 City: State: __ Zip Code:
 Telephone: Email:

10. **Application Prepared by:**

Ms. Mr. First Name: Last Name:
 Title:
 Address:
 City: State: Zip Code:
 Telephone: __ Email:
 Organization:

11. **Authorized Applicant Agent (proof of authorization authority required)**

Ms. Mr. First Name: Last Name:
 Title:
 Address:
 City: State: __ Zip Code:
 Telephone: Email:
Signature:_____ Date:

12. Local Mitigation Strategy (LMS) Compliance

a. All proposed projects must be included in the county’s Local Mitigation Strategy (LMS) Project List, and on file with FDEM’s Mitigation Bureau Planning Unit. Does your jurisdiction have a current FEMA Approved Mitigation Plan and this project is listed? Yes No

b. Attached is a letter of endorsement for this project from the county’s LMS Coordinator. Yes No Ensure the LMS endorsement letter contains both the Total Estimated Projects Cost (Section IV. D.), along with the Estimated Federal Share (Section IV. I.I.) allocated to this project.

c. The LMS project list and endorsement letter both have an estimated cost column and Federal Share amount that is within \$500.00 between the two. Yes No

13. Has this project been submitted under a previous disaster event? No

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 27P-22-.007 F.A.C FDEM Form No. HMGP Application (01-2020) (Eff. 01-2020)

Yes, provide the disaster number and project number (as applicable):

3
 27P-22-.007 F.A.C FDEM Form No. HMGP Application (01-2020) (Eff. 01-2020)

Section II – Project Description

A. Hazards to be Mitigated / Level of Protection

1. Select the type of hazards the proposed project will mitigate: Flood Wind Storm surge Wildfire Other (list):

2. Identify the type of proposed project:
 Elevation and retrofitting of residential or non-residential structure Acquisition and Relocation Acquisition and Demolition

Wind retrofit Drainage project that reduces localized flooding Generator Other (explain)

3. List the total number of persons that will be protected by the proposed project (include immediate population affected by the project only):

4. List how many acres of “Total Impacted Area” is to be protected by the proposed project (include immediate area affected by the project only):

5. Fill in the level of protection and the magnitude of event the proposed project will mitigate. (e.g. 23 structures protected against the 100-year storm event (1% chance)

__structure(s) protected against the -year storm event (10, 25, 50, 100, or 500 year storm event)

__structure(s) protected against mile per hour (mph) winds

6. Check **all** item(s) the project may impact:

Wetlands	Water Quality	Previously Undisturbed
Floodplain	Coastal Zone	Toxic or Hazardous
Historic Resources	Fisheries	Threatened &
Vegetation	Public Controversy	Potential for Cumulative
Removal	Other	Impacts

7. **Engineered projects:** If your project has been already designed and engineering information is available, attach to your application **ALL** calculations, H&H study and design plans (e.g. Drainage Improvement, Erosion Control, or other special project types). No Yes If so, see Attachment #(s) .

B. Project Description, Scope of Work, and Protection Provided (Must be Completed in Detail)

Describe, in detail, the existing problem, the proposed project, and the scope of work. Explain how the proposed project will **solve** the problem(s) and provide the level(s) of protection described in Part A. Also, if available, attach a vendor’s estimate and/or a contractor’s bid for the scope of work. **Ensure that each proposed project is mitigation and not maintenance.**

1. Describe the existing problems:

2. Describe the type(s) of protection that the proposed project will provide:

3. Scope of Work (describe in detail what you are planning to do):

4. Describe any other on-going or proposed projects in the area that may impact, positively or negatively, the proposed HMGP Project:

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27P-22-.007 F.A.C FDEM Form No. HMGP Application (01-2020) (Eff. 01-2020)

Section III – Project Location (Fully describe the location of the proposed project.)

A. Site

1. Describe the physical location of this project, including street numbers (or neighborhoods) and project site zip code(s). Provide precise longitude and latitude coordinates for the site utilizing a hand-held global positioning system (GPS) unit or the equivalent:

Site Location: _ Address(es):
GPS coordinates (decimal degree format): _Project Zip Code(s):

2. Titleholder:
3. Is the project site seaward of the Coastal Construction Control Line (CCCL)? Yes No
4. Provide the number of each structure type (listed below) in the project area that will be affected by the project. Include *all* structures in project area.

Residential property: _____ Public buildings: _____
Businesses/commercial property: Schools/hospitals/houses
Other: _____

B. Flood Insurance Rate Map (FIRM) Showing Project Site

1. Attach one (1) copy of the FIRM map, a copy of the panel information from the FIRM, and, if available, the Floodway Map. ***FIRM maps are required for this application (if published for your area). Also, all attached maps must have the project site and structures clearly marked on the map.*** FIRMs are typically available from your local floodplain administrator who may be located in a planning, zoning, or engineering office. Maps can also be ordered from the Map Service Center at 1-800-358-9616. For more information about FIRMs, contact your local agencies or visit the FIRM site on the FEMA Web- page at <https://msc.fema.gov/portal>.

2. Using the FIRM, determine the flood zone(s) of the project site (Check all zones in the project area)
(See FIRM legend for flood zone explanations) (A Zone must be identified)

VE or V 1-30	AE or A 1-30
AO or A H	A (no base flood elevation given)
B or X (shaded)	C or X (unshaded)

Floodway

Coastal Barrier Resource Act (CBRA) Zone (Federal regulations strictly limit Federal funding for projects in this Zone; coordinate with your state agency before submitting an application for a CBRA Zone project).

3. **If theIRM Map for your area is not published**, attach **F** a copy of the Flood Hazard Boundary Map

4. Attach a copy of a Model Acknowledgement of Conditions for Mitigation in Special Flood Hazard Area

C. Maps with Project Site and Photographs

1. Attach a copy of a city or county scale map (large enough to show the entire project area) with the project site and
2. Attach a USGS 1:24,000 TOPO map with project site
3. For **acquisition** or **elevation** projects, include copy of Parcel Map (Tax Map, Property Identification Map, etc.) showing each property to be acquired or elevated. Include
4. Attach photographs (at a minimum 4 photographs) for each project site per application. The photographs should be representative of the project area, including any relevant streams, creeks, rivers, etc. and drainage areas that affect

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27P-22-.007 F.A.C FDEM Form No. HMGP Application (01-2020) (Eff. 01-2020)

Section IV – Budget/Costs

In order to assist applicants with filling out the following Budget section, we have provided the following instructions for your convenience. For this section, we ask that you provide details of all the estimated costs of the project, as it is used for the benefit-costs analysis as well as for the feasibility and effectiveness review.

For the cost sections relating to Materials, Labor, and Fees, it is important to note, Lump sums without supporting documentation showing a breakdown of those costs are not acceptable. For those items

B. Executive Order 12898; Environmental Justice for Low Income and Minority Population:

1. Are there low income or minority populations in the project area or adjacent to the project area? No Yes; describe any disproportionate and adverse effects to these populations:

2. To help evaluate the impact of the project, explain below or attach any other information that describes the population, or portion of the population, that would be either disproportionately or adversely affected. Include specific efforts to address the adverse impacts in your proposal narrative and budget.

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C. Tribal Consultation (Information Required)

Section 106 of the National Historic Preservation Act (NHPA) requires federal agencies to take into account the effect of their undertakings on historic properties. The NHPA requires that agencies must complete this process prior to the expenditure of any Federal funds on the undertaking. A Tribal Consultation is required for any project disturbing ground or moving soil, including but not limited to: drainage projects; demolition; construction; elevation; communication towers; tree removal; utility improvements.

1. Describe the current and future use of the project location. A land use map may be provided in lieu of a written description.

2. Provide information on any known site work or historic uses for project location.

Attach a copy of a city or county scale map (large enough to show the entire project area) with the horizontal limits (feet) and vertical depths (square feet) of all anticipated ground disturbance of 3 inches or more.

D. Alternative Actions (Information Required)

The NEPA process requires that at least two alternative actions be considered that address the same problem/issue as the proposed project. In this section, list **two feasible** alternative projects to mitigate the hazards faced in the project area. One alternative is the “No Action Alternative”.

1. No Action Alternative

Discuss the impacts on the project area if no action is taken.

2. Other Feasible Alternative

Describe a feasible alternative project that would be the next best solution if the primary alternative is not accomplished. This could be an entirely different mitigation method or a significant

modification to the design of the current proposed project. Include a Scope of Work, engineering details (if applicable), estimated budget and the impacts of this alternative. Complete all of parts a-e (below).

a. Project Description for the Alternative

Describe, in detail, the alternative project, and explain how the alternative project will solve the problem(s) and/or provide protection from the hazard(s). Also, provide pros and cons for this alternative and a reason for why it was not selected.

b. Project Location of the Alternative (describe briefly, if different from proposed project)

Attach a map or diagram showing the alternative site in relation to the proposed project site (if different from proposed project)

c. Scope of Work for Alternative Project

d. Impacts of Alternative Project

Discuss the impact of this alternative on the project area. Include comments on these issues as appropriate: Environmental Justice, Endangered Species, Wetlands, Hydrology (Upstream and Downstream Surface Water Impacts), Floodplain/Floodway, Historic Preservation and Hazardous Materials.

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e. Estimated Budget/Costs for Alternative Project

In this section, provide details of all the estimated costs of the alternative project (round figures to the nearest dollar). A lump sum budget is acceptable.

Materials:	
Labor:	
Fees:	
Total Estimated Project Cost:	\$ 0.00

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27P-22-.007 F.A.C FDEM Form No. HMGP Application (01-2020) (Eff. 01-2020)

HMGP ENVIRONMENTAL REVIEW

Information and Documentation Requirements by Project Type

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Section VI – Maintenance Agreement

All applicants whose proposed project involves the retrofit or modification of existing public property or whose proposed project would result in the public ownership or management of property, structures, or facilities, must first sign the following agreement prior to submitting the application to FEMA.

(NOTE: Not applicable to projects solely related to residential or private property.)

The _____, State of Florida, hereby agrees that if it receives any Federal aid as a result of the attached project application, it will accept responsibility, at its own expense if necessary, for the **routine** maintenance of any real property, structures, or facilities acquired or constructed as a result of such Federal aid. Routine maintenance shall include, but not be limited to, such responsibilities as keeping vacant land clear of debris, garbage, and vermin; keeping stream channels, culverts, and storm drains clear of obstructions and debris; and keeping detention ponds free of debris, trees, and woody growth.

The purpose of this agreement is to make clear the Sub-recipient’s maintenance responsibilities following project award and to show the Sub-recipient’s acceptance of these responsibilities. It does not replace, supersede, or add to any other maintenance responsibilities imposed by Federal law or regulation and which are in force on the date of project award.

Signed by _____ the duly authorized representative
(printed or typed name of signing official)

(title)

This (day) of _____ (month), (year).

Signature*

**Note: The above signature must be by an individual with legal signing authority for the respective local government or county (e.g., the Chairperson, Board of County Commissioners or the County Manager, etc.)*

This guidance/checklist contains an explanation, example and/or reference for information requested in the application.

Use this list to assure your application is complete and includes the required information for HMGP projects. The appropriate documentation must also be attached. It is important to note that this list is similar to the form that will be used during the application sufficiency review by the HMGP staff.

Project Title: _____ Applicant: _____

Application Information	Explanation of Information Required
	ü

Section I

B. Applicant Information

FEMA DR-FL DISAST	Type in the four digit number FEMA assigned to the disaster that this application is being submitted.
FD	Type in the Disaster name. (Example: Hurricane _____)
Title of Project	The project title should include: 1) Name of Applicant, 2) Name of Project, 3) Type of Project.
1.	Name of organization applying. Must be an eligible _____.
2.	State or local government, recognized Native American tribe, or private non-profit organization. If private non-profit, attach documentation showing _____.
3.	Indicate county in which the project is located.
4. State Legislative and Congressional District	Specify the appropriate State Senate, House and Congressional District code for the project site . For multiple sites, list codes for each site. http://www.myfloridahouse.gov/sections/representatives
5. Federal Tax ID	List the Federal Employer’s Identification Number (FEIN), also known as Federal Tax Identification number. 9-digit code. May be obtained from your _____.
6. DUNS Number	Include Data Universal Numbering System (DUNS) number in appropriate location on application. Typically, this number can be obtained through your finance department. If not, use the link below to look up your entity. If none exists you can use the same _____.
7. FIPS Code	List the Federal Information Processing Standards (FIPS) Code. May be obtained from your finance/accounting/grants department. If none, submit FEMA Form 90-49. See state website under _____.
8. NFIP ID Number	List the National Flood Insurance Program (NFIP) number. You must be a participating NFIP member to be eligible for HMGP funding. Make sure that the _____.
9. Point of Contact	Provide all pertinent information for the point of contact. This person serves as the coordinator of the project. If this information changes once the _____.
10. Applicant	Provide the preparer information. May be different from the point of contact (line 9) and/or the _____.

11. Authorized Applicant Agent	An authorized agent must sign the application. <i>"An authorized agent is the chief elected official of a local government who has signature authority, so for a county it would be the Chairman of the Board of County Commissioners and for a municipality it would be the Mayor (the exact title sometimes varies). Any local government may delegate this authority to a subordinate official (like a City Manager)"</i>
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	For Private Non-Profit: A member of its Board of Directors or whoever has authority to authorize funding for such a project. If this task is delegated
12. LMS Compliance	<p>a) LMS Project List: All proposed projects must be included in the county's Local Mitigation Strategy (LMS) Project List and must be on file with FDEM's Mitigation Bureau Planning Unit.</p> <p>b) LMS Endorsement Letter: All proposed projects must include an endorsement letter from the county's Local Mitigation Strategy Coordinator. You may use 1 letter as long as it includes every proposed project.</p> <p>c) Estimated Costs & Application Costs: The LMS Project List must include an Estimated Cost column and each HMGP project application must be within \$500.00 of that Project List's estimated cost. Also ensure that the Federal Cost Share indicated on the LMS Coordinator's Endorsement Letter exactly</p>
13. Previous Submittal	If the project has been previously submitted under another disaster, provide the disaster

Section II - Project Description

A. Hazards to be Mitigated/Level of Protection

1. Type of Hazards	Type of Hazards the Proposed Project will Mitigate: Identify the hazard(s) that the proposed project will mitigate. <i>More than one</i>
2. Identify the Type of	Identify the Type of Proposed Project: Describe the mitigation project being proposed.
3. Number of Persons Protected	Explain how many people will be protected by or benefit from the proposed project. (Example: A <i>drainage project improving a residential area of</i>
4. Total Impacted Area	Explain how many acres will be impacted from the proposed project: <i>Drainage/Berm/Pond/Culverts/Flood hazard</i>

5. Level of Protection	Specify the level of protection and magnitude of the event the proposed project will mitigate. Attach support documentation that verifies the stated level of protection. (Example: In a wind retrofit project, it will be the design wind speed)
6. Project	Identify all the items the project may impact or
7. Engineered Projects (e.g. Drainage)	Include available engineering calculations, studies, and designs for the proposed project showing results from applied Recurrence Interval scenarios before and after mitigation (Number

B. Project Description, Scope of Work, and Protection Provided (Must be Completed in Detail)

1. Existing Problem	Describe the existing problem, location, source of the hazard, and the history and extent of the damage. Include newspaper articles, insurance documentation, photographs, etc. <i>If this project</i>
2. Type of	Determine how the funding will solve the
3. Scope of Work:	What the Project Proposes to Do: Determine the work to be done. The scope of work must meet eligibility based on HMGP regulations and

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	mitigation action, not maintenance.) <i>Does the proposed project solve a problem independently or constitute a functional part of a solution where there is assurance that the project as a whole will be completed (44 CFR 206.434[c][4])? Does the proposed project address a problem</i>
4. On-Going or Proposed Projects in the Area	Determine if other projects, zoning changes, etc. are planned (particularly in the same watershed if flooding is being addressed) that may negatively or positively impact the proposed project. If there is a drainage project or downstream issue elsewhere, it may eliminate the current flooding issue, erasing the need for the proposed project. Response applies to

Section III - Project Location

A. Site

1. Physical Location	List the physical location of the project site(s) including the street number(s), zip code(s) and GPS coordinates (latitude/longitude, in decimal degrees). <i>The physical address must correspond</i>
2. Titleholder	Provide the titleholder's name.
3. Project Seaward of	Determine if the project site is located seaward of the Coastal Construction Control Line.

4. Number and Types of Structures Affected	Specify the number and type of properties affected by the project. (Example: Drainage project that affects 100 homes, 15 businesses and 2 schools.) What does
B. Flood Insurance Rate Map (FIRM) Showing Project Site	

1. Copies of FIRM	Attach a copy (or copies) of the FIRM and clearly identify the project site. The FIRM Panel number must be included. To obtain
2. Flood Zone Determination	Specify the flood zone(s) of the project site(s). If project is located in a Special Flood Hazard Area, Amount of coverage
3. Flood Hazard Boundary Map (FHBM)	Not required if a copy of the FIRM is attached.
4. Model Acknowledgement of Conditions form	The Model Acknowledgement of Conditions for Mitigation in Special Flood Hazard Area form is required for those structures receiving federal funds that will also remain in the special flood hazard area

D. C. Maps with Project Site and Photographs

1. City/County Map with USGS TOPO with Parcel/Tax Map	The project site and staging location (if applicable) should be clearly marked on a legible City/County map. The map should be large legible USGS 1:24,000 TOPO map. To obtain a Parcel, Tax or Property Identification map is required only for acquisition and elevation
4. Site Photographs	At least four photographs are required that clearly identify the project site. The photos must be representative of the project area, including any relevant streams, creeks, rivers, etc., and drainage areas that affect the project site or will be affected by the project. The front back and

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	photographs of specific elements of the structure affected by the project (windows for shutters or window replacements) should also
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Section IV - Budget/Costs

Make sure all calculations are correct. Provide a breakdown of materials, labor and fees for the proposed project. Support documentation must be attached, i.e. vendor's quote, professional estimate (from engineer, architect, local building official, etc.). The proposed budget line items should represent allowable costs associated with the scope of work. Contingency Cost should be included as a line item in the budget section, and justified – Maximum allowed is 5%, and is required to complete this section; it will be used for the Benefit-Cost Analysis (BCA). Costs should be accurate, complete and

reasonable compared to industry standards. Make sure the total cost is correct on the entire application.

A. Materials	List materials and their associated costs.
B. Labor	Provide a breakdown of description, hours, rate, and cost or lump sum labor cost. Can use in-kind contribution as part of the 25% match. (Attach support documentation for in-kind
C. Fees Paid	Provide a breakdown of associated fees i.e., consultants, studies, engineering, permits, and project management. Maintenance is not
D. Total Estimated	This number includes all project costs without contingency costs included. Make sure all
E. Contingency Cost	Per FEMA's HMA Guidance (Section VI Part D.3.4), a contingency cost is, "an allowance in the total cost estimate to cover situations that cannot be fully defined at the time the cost estimate is prepared but that will likely result in additional eligible costs. Allowances for major project scope changes, unforeseen risks, or extraordinary events may not be included as contingency costs." The applicant may request up to 5% of material/labor costs. As with other line items,
F. Final Project Cost	This number includes any contingency costs that were requested. The final BCA will use
G. Project Management Costs	After reading the guidance provided on pg. 5, select either YES or NO to indicate your need for management costs for this project. If YES, provide a breakdown of description, hours, rate, and costs for requested
H. Total Estimated Management	This will auto complete based on what is entered into the cost cells above. Your request must not exceed 5 percent of the total project
I. Funding Sources (round figures to the nearest dollar)	

The proposed sources of non-federal matching funds must meet eligibility requirements. (Except as provided by Federal statute, a cost-sharing or matching requirement may not be met by costs borne by another Federal grant.) 2 CFR Part 200.306.

1. Estimated Federal Share	The estimated Federal share is generally 75%. If the Federal share is not 75%, assure actual amount is entered. It could be 50.1234% or 35.1234% etc. of the total dollar amount of
2. Non-Federal Share	May include all 3 sources, i.e. cash, in-kind and global match, as long as the total is a minimum of 25%. Match cannot be derived from a federal
3. Cash	Cash- Local funding will be utilized for the non-federal share. Enter amount of cash and
4. Total In-Kind	May use materials, personnel, equipment, and supplies owned, controlled and operated from within governing jurisdiction as an in-kind match.

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	organizations furnished free of charge, donated supplies, and loaned equipment or space. The value placed on these resources must be at a fair market value and must be documented. If in kind is claimed from outside
5. Total In-house	Sub-Recipient employees, equipment, etc. – internal services (must utilize the Personnel Activity Report or the Equipment Activity
6. Total Project (Global) Match	Project (global) match must 1) meet all the eligibility requirements of HMGP; and 2) begin after FEMA’s approval of the match project. A separate HMGP application must be submitted for global match projects. Indicate which project(s) will be matched
7. Other Agency	Identify Non-Federal Agency and availability date; provide the documentation from the
8. Total Funding	Total must represent (100%) of the total estimated project cost. Ensure that percentages match corresponding cost-shares
9.	Your requested amount must be equal to or less than 5 percent of the total project cost

d. Impacts of the Alternative Project

e. Estimated Budget/Costs for the Alternative Project Materials, Labor, and Fees Paid Total Estimated Project Costs

Discuss the impacts on the project area if no action is taken.

This is a FEMA and FDEM requirement for any Application Review. A narrative discussion of at least three project alternatives (from No Action to the most effective, practical solution) and their impacts, both beneficial and detrimental is required. It is expected that the jurisdiction has completed sufficient analysis to determine the proposed project can be constructed as submitted and it supports the goals and objectives of the FEMA approved hazard mitigation plan. Has the proposed project been determined to be the most practical, effective and environmentally sound alternative after consideration of a range of options? (44 CFR 206.434[c][5][iii]) It is very important and a requirement that an Alternative project is submitted. NEPA requires that at least three alternatives must be presented to mitigate the problem. In addition to the proposed action and no action, one other **feasible** alternative must be provided.

Describe the surrounding environment. Include information regarding both natural (i.e., fish, wildlife, streams, soils, plant life) and built (i.e., public services, utilities, land/shoreline use, population density) environments.

Describe how the alternative project will solve the problem and provide protection from the hazard. Provide enough detail to describe the project for the evaluation panel to decide the best course of action for the state. Include any appropriate diagrams, sketch maps, amount of materials and equipment, dimensions of project, amount of time required to complete, etc.

Total cost is required.

Detailed line items are not required. Just enter a total amount.

Total cost is required. Vendor quote is not required. A lump sum budget may be submitted as justification to why this alternative was not chosen.

Section VI – Maintenance Agreement

Maintenance Agreement	Complete, sign and date the maintenance agreement. The maintenance agreement must be signed by an individual with
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J. Project Milestones/Schedule of Work

Section V - Environmental Review & Historic Preservation Compliance

No work can begin prior to the completion of the environmental (NEPA) review. In order for the Environmental staff to conduct the NEPA review, all sections listed below must be completed.

B. Executive Order 12898, Environmental Justice for Low Income and Minority Population

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C. Information required for Tribal Consultation

D. Alternative Actions

- 1. No Action Alternative**
- 2. Other Feasible Alternative Action**

a. Project Description

b. Project Location of the Alternative

c. Scope of Work – Alternative Project

Other Required Documentation

Go to www.floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/ for additional documents

1. Maps	All maps must be included with the application.
2. FFATA Form	During contracting with the state, complete, sign and date the FFATA Project File Form. Instructions are provided for your
3. SFHA Acknowledgement of Conditions	Required for all projects in the Special Flood Hazard Area. Read and sign the SFHA Acknowledgement of Conditions
4. Pre-award Cost Form	If pre-award costs are being requested with your project, be sure to identify all pre-award costs in the application budget per

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5. Request for Public	Applicable if no FIPS number is assigned to applicant/recipient.
6. Model Statement of Assurances for Property Acquisition	For Acquisition projects only.
7. Declaration	For Acquisition projects only. Must be signed by all persons whose names are on the
8. Notice of Voluntary Interest	For Acquisition projects only. Two forms are available for your convenience. Use the form that is most appropriate to your situation. Must
9. Statement of Voluntary Participation for Acquisition of Property	For Acquisition projects only. Must be signed by all persons whose names are on the property deed.
10. Worksheets	The appropriate worksheet(s) must be completed and submitted with the application. a. Flood Control – Drainage Improvement b. Generator c. Tornado Safe Room d. Hurricane Safe Room e. Wind Retrofit

*Submit **1 original (signed) and 1 full copy** of the entire application and backup documentation. Include a full copy of the submittal and all documentation on CD or thumb drive.

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Use the following template to list any supporting documentation that is **included on the CD or flashdrive**. Clearly and concisely label each attachment on this form to correspond with the file

name on the CD or flashdrive. In the first column list which section and item (from the HMGP application) the attachment refers to. *Example: Section 2, Item 1. If any required documentation is not included on the CD or flashdrive, the application will be considered incomplete and will not be considered for possible funding.*

Section # & Item	Attached Document Name
1	
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Attachment G

Sub-Recipient Management Cost Request Form

Any applicant requesting sub-recipient management cost (SRMC) in their application for their project must include a completed SRMC request form at application. This form is available on the FDEM’s HMGP site at the link provided. The form itself is underneath the “Application” dropdown menu and contains SRMC forms for phased and non- phased projects, guidance and reference information, and sample forms for phased and non-phased projects. If you have any questions regarding this form, please email the HMGP distribution list at demsrmchelpdesk@em.myflorida.com.

<https://www.floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/>

Attachment H

FDEM Filesharing System Access Request

When you are ready to submit your applications for review, please email the Division at DEM_HazardMitigationGrantProgram@em.myflorida.com to request access to the filesharing system to upload your documents. In the body of your email copy and paste the following script and provide the information for everything in **bold**.

Request Script

Once the Division receives this request email, unique folders will be created in the system. A notification email is then sent to everyone in the above request with a link to these folders to begin the upload/submission process.

If for any reason a person needs to be added or removed from this folder access list, please use the following script to request this access change.

Access Change Script

(Sub-applicant Name) is requesting access change to the Division’s filesharing system for projects submitted under **(Disaster Name)**.

1. **County name projects are being submitting under**
2. **The names and emails of anyone who needs to be added/removed** (Note the specific projects that the listed person(s) should have access to and/or access revoked from)

Please Read

Requesting access to the Division’s filesharing system can be done at any time during the relevant open application period. We highly recommend that you request access as soon as possible if you plan to submit an application.

DO NOT wait until the end of the application window to request access, as it will leave little time to address any unforeseen technical issues with your submission(s). Doing so may result in applications being deemed ineligible for being past the deadline.

The Division’s filesharing system will time stamp files once they are completely uploaded. Many applications have very large files that may take time to fully upload. Plan accordingly.

An application will be considered submitted if the application and all necessary supporting documentation are fully uploaded by the deadline listed in the relevant Notice of Funding Availability.

(Sub-applicant Name) is ready to submit applications for **(Disaster Name)** and is requesting access to the Division’s filesharing system.

1. **County name projects are being submitting under**
2. **Number of projects being submitted from the sub-applicant above**
3. **The names and emails of everyone who needs to have access** (By default all persons listed will have access to all project files submitted under this request, unless noted otherwise)

ADMINISTRATION COMMISSION

Notice of Publication of 2022-2023 Regulatory Plan
 NOTICE IS HEREBY GIVEN that on September 7, 2022, the Administration Commission published its 2022-2023 Regulatory Plan in accordance with section 120.74, Florida Statutes. The Regulatory Plan is available on the Cabinet website at <http://www.myflorida.com/myflorida/cabinet/adcom/agencyregulatoryplan.pdf>.

FLORIDA LAND AND WATER ADJUDICATORY COMMISSION

Notice of Publication of 2022-2023 Regulatory Plan
 NOTICE IS HEREBY GIVEN that on September 7, 2022, the Florida Land and Water Adjudicatory Commission published its 2022-2023 Regulatory Plan in accordance with section 120.74, Florida Statutes. The Regulatory Plan is available on the Cabinet website at <http://www.myflorida.com/myflorida/cabinet/flwac/agencyregulatoryplan.pdf>.

DEPARTMENT OF FINANCIAL SERVICES

FSC - Financial Institution Regulation

Division of Financial Institutions

NOTICE OF FILINGS

Financial Services Commission

Office of Financial Regulation

September 08, 2022

Notice is hereby given that the Office of Financial Regulation, Division of Financial Institutions, has received the following application. Comments may be submitted to the Division Director, 200 East Gaines Street, Tallahassee, Florida 32399-0371, for inclusion in the official record without requesting a hearing. However, pursuant to provisions specified in Chapter 69U-105, Florida Administrative Code, any person may request a public hearing by filing a petition with the Agency Clerk as follows:

By Mail or Facsimile	OR	By Hand Delivery
Agency Clerk		Agency Clerk
Office of Financial Regulation		Office of Financial Regulation
P.O. Box 8050		General Counsel's Office
Tallahassee, Florida 32314-8050		The Fletcher Building, Suite 504
Phone: (850) 410-9889		101 East Gaines Street
Fax: (850) 410-9663		Tallahassee, Florida 32399-0379
		Phone: (850) 410-9889

In accordance with the Americans with Disabilities Act, persons with disabilities needing a special accommodation to participate in this proceeding should contact the Agency Clerk no later than seven (7) days prior to the filing deadline or proceeding, at the Office of Financial Regulation, The Fletcher Building, Suite 118, 101 East Gaines Street, Tallahassee, Florida 32399-0379, Phone: (850) 410-9889, or by Email: agency.clerk@flofr.gov.

The Petition must be received by the Clerk within twenty-one (21) days of publication of this notice (by 5:00 P.M., September 23, 2022):

Application to Establish an International Representative Office
 Applicant and Location: Banco de Reservas de la Republica Dominicana, Isabel la Catolica 202, Santo Domingo

Proposed Florida Locations: 1100 Brickell Avenue, 14th Floor, Miami, Miami-Dade, Florida 33131

Proposed Name: Banco de Reservas de la Republica Dominicana

Date Received: September 2, 2022

Distribution: (Publication Not Required)

Federal Deposit Insurance Corporation, Atlanta, GA

Federal Reserve Bank of Atlanta, Atlanta, GA

Comptroller of the Currency, Atlanta, GA

Lloyd Winans

DEPARTMENT OF ECONOMIC OPPORTUNITY

Division of Community Development

Notice of Funding Availability: Florida Recovery Housing Program

The Florida Department of Economic Opportunity (DEO) announces the availability of the Florida Recovery Housing Program (RHP) funding for public and private nonprofit organizations and units of general local government. This program was established under the SUPPORT Act to provide stable, temporary housing to individuals in recovery from a substance abuse disorder.

Approximately \$1.6 million in funding will be available to eligible applicants. Each eligible applicant may submit one application requesting a minimum of \$500,000 in grant funding.

The application cycle for RHP funding will open on September 9, 2022, and close at 5:00 p.m., Eastern Time (ET) on October 14, 2022. Funding requests must be submitted through the RHP Application for Funding, which is available at www.FloridaJobs.org/RHP. The Recovery Housing Program Application Webinar will be held on September 15, 2022, from 10:00 a.m. to 12:00 p.m., ET, via Microsoft Teams or you may call-in at +1 850-988-5144 and the Phone Conference ID is 910 062 468#.

Electronic applications will be accepted online. An email request for a link to submit the application must be sent to RHP@DEO.MyFlorida.com. Instructions and access to upload the completed documents will be provided by return email within two business days. All applications must be received by 5:00 p.m. ET on October 14, 2022. The application submission requirements and instructions, program guidelines, and other relevant information will be available on DEO's website at www.FloridaJobs.org/RHP prior to opening of the application cycle.

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 five days before the workshop/meeting by contacting: Florida Small Cities and Rural Communities, 850-717-8405, or RHP@DEO.MyFlorida.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).

For questions or requests for technical assistance regarding the RHP program, proposed projects, or the completion and submission of an application, please email RHP@DEO.MyFlorida.com or call 850-717-8405.

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.
