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STATE OF FLORIDA

DEPARTMENT OF REVENUE

CHAPTER 12E-1, FLORIDA ADMINISTRATIVE CODE

CHILD SUPPORT PROGRAM

AMENDING RULES 12E-1.011, 12E-1.032, 12E-1.039, AND 12E-1.041

**12E-1.011 Lottery Intercept.**

(1) No change.

(2) Definitions. As used in this rule:

(a) "Obligor" means a person responsible for making payments pursuant to an order establishing, enforcing, or modifying an obligation for child support~~, spousal support,~~ or for child and spousal support when enforced by the Department.

(b) "Past-due support" means the amount of support owed pursuant to an order for child support~~, spousal support,~~ or for child and spousal support when enforced by the Department that has not been paid. Also included in past-due support are amounts owed to the Department for court or administrative costs.

(c) No change.

(3) Procedure.

(a) Pursuant to section 24.115, F.S., the Department transmits data to the Department of the Lottery identifying obligors who owe past-due support for the Department of the Lottery to compare with personally identifying information provided by claimants of prizes equal to or greater than $600.

(b) If the Department of the Lottery determines that a claimant is an obligor who owes past-due support, the Department of the Lottery notifies the Department. The Department then provides a completed Verification of Past Due Support Lottery Intercepts (CS-EF161) form to the Department of the Lottery that indicates the amount of past-due support owed or that the Department is withdrawing its claim against the claimant's prize. Form CS-EF161, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx), is hereby incorporated by reference, effective xx/xx.

(c) If the claimant owes past-due support as indicated on form CS-EF161, the Department mails the obligor a Notice of Intent to Deduct Lottery Winnings (CS-EF160) form, as specified in paragraph (4).

(d) After receiving a form CS-EF161 from the Department confirming that the claimant owes past-due support, the Department of the Lottery withholds payment of the prize to the claimant and remits payment to the Department by check, up to the amount of past-due support.

(e) The Department holds the payment remitted by the Department of the Lottery until the proceeding is concluded. If the matter is uncontested or the Department prevails in a contested proceeding, the Department applies the payment to the child support case as a credit against past-due support and disburses the payment due. If the action is contested and the obligor prevails, the Department sends all or part of the payment to the obligor in accordance with the findings and conclusions in the final order.

~~Certification of Past-Due Support. The Department certifies all parents who owe a past-due amount for lottery intercept. Prior to the payment of a prize to any obligor owing past-due support, the Department of the Lottery will verify the information provided by the Department to determine if past-due support is owed. Upon the request of the Department of the Lottery, the Department will provide written certification that the obligor owes past-due support and specify the amount owed. Upon receipt of such written certification from the Department, the Department of the Lottery will transmit the prize money, not to exceed the amount certified as past-due support, to the Department.~~

(4) Notification of Intercept.

(a) The Department shall ~~will~~ notify the obligor by regular U.S. mail, that the prize money is being intercepted and will be applied to the balance of past-due support. The Notice of Intent to Deduct Lottery Winnings (CS-EF160), hereby incorporated ~~herein~~ by reference, effective 07/22, (http://www.flrules.org/Gateway/reference.asp?No=Ref-14345) shall ~~will~~ be sent to the address provided by the obligor to the Department of the Lottery. The obligor may request an administrative hearing as set forth in Chapter 120, F.S., to contest a mistake of fact about the amount of past-due support or the identity of the obligor.

(b) If a petition for administrative hearing is not received within 21 days of receipt of the notice specified in paragraph (4)(a), the prize received from the Department of the Lottery shall ~~will~~ be applied to the obligor's past-due support.

(c) To request an administrative hearing purusant to Chapter 120, F.S., the obligor must ~~will~~ file a petition for an administrative hearing with the Department of Revenue, Child Support Program, Deputy Agency Clerk, P.O. Box 8030, Tallahassee, FL 32314-8030, within 21 days of receipt of the ~~this~~ notice. If a petition for administrative hearing is not received within 21 days of receipt of the ~~this~~ notice, the obligor will be considered to have waived the right to

a hearing and the intercept shall ~~will~~ be applied to the obligor's past-due support ~~obligation~~.

(5) No change.

*Rulemaking Authority 409.2557(3) FS. Law Implemented 24.115(4), History–New 6-17-92, Amended 7-20-94, Formerly 10C-25.008, Amended 1-23-03, 9-17-18, 11-12-20, 6-9-22,_____.*

Substantial rewording of Rule 12E-1.032 follows. See Florida Administrative Code for present text.

**12E-1.032 Electronic Remittance of Support Payments.**

(1) Section 61.1824(6), F.S., provides for the electronic remittance of support payments deducted by an employer pursuant to an income deduction order or income deduction notice and the electronic submission of associated case data to the State Disbursement Unit. An employer who needs information or assistance may contact the State Disbursement Unit at fl.smartchildsupport.com or 1(888)-883-0743.

(2) Definitions. As used in this rule:

(a) "Addenda record" means information required by the Department in an Automated Clearing House Credit or "ACH credit" transfer that is needed to completely identify an employee or provide information concerning a payment, in an approved electronic format.

(b) "Associated case data" means support payment information required to be submitted to the State Disbursement Unit pursuant to Title IV-D of the Social Security Act.

(c) "Automated Clearing House" or "ACH" means a central distribution and settlement point for the electronic clearing of debits and credits between financial institutions rather than the physical movement of paper items.

(d) "Automated Clearing House Credit" or "ACH credit" means the electronic transfer of funds initiated by the employer, cleared through the ACH for deposit to the State Disbursement Unit.

(e) "Automated Clearing House Debit" or "ACH Debit" means the electronic transfer of funds initiated by the State Disbursement Unit, cleared through the ACH for deposit to the State Disbursement Unit.

(f) "Department" means the Florida Department of Revenue.

(g) "Employer" means a person, business, or organization that pays one or more workers to perform a service or engage in an activity in exchange for financial compensation.

(h) "Employer's designated child support payment processor" or "employer's processor" means a financial institution or business used by the employer to provide ACH support payment services.

(i) "National Automated Clearing House Association" or "NACHA" means the national trade association for electronic payments associations that establishes the rules, industry standards, and procedures governing the exchange of commercial ACH payments by depository financial institutions.

(j) "State Disbursement Unit" or "SDU" means the single unit in the state that receives and processes support payments pursuant to Section 61.1824, F.S.

(3) Employers or employers' processors electronically submitting support payments and associated case data may remit payments using ACH Credit or ACH Debit.

(4) Procedures for ACH Credit.

(a) The employer or employer's processor must contact the employer's financial institution and arrange remittance of the support payment to the State Disbursement Unit by ACH credit.

(b) For the employer to establish ACH payments directly to the State Disbursement Unit, the employer or the employer's processor must contact the SDU at fl.smartchildsupport.com and provide the information in subparagraph (c). The State Disbursement Unit shall compare the information provided by the employer or the employer's processor with identifying information in the SDU's system. Identifying information submitted by the employer or the employer's processor must match the identifying information in the SDU's system. The SDU shall work with the employer to resolve any discrepancies.

(c) The employer or the employer's processor must provide the SDU with the following information for each employee for whom payments will be remitted:

1. Employee's first and last name;

2. Employee's Social Security Number;

3. County where the support order was entered as stated in the income withholding order;

4. Remittance ID~~,~~ as stated in the income withholding order; and

5. Payment amount to be remitted for the employee.

(d) When the information provided in paragraph (c) matches the information in the SDU's system, the SDU shall provide the employer or the employer's processor with the SDU's banking information. The employer must complete a prenotification test before electronic remittance of support payments begins.

(e) Neither the State Disbursement Unit nor the Department will pay for expenses incurred by the employer or employer's processor to use ACH credit.

(f) All ACH credit transactions must be in the NACHA Cash Concentration and Disbursement Plus (CCD+) or NACHA Corporate Trade Exchange (CTX) format containing an Accredited Standards Committee (ASC) X12 820 Payment Order/Remittance Advice Transaction Set with associated addenda records for child support. The required NACHA guidelines and formats for electronic remittance and associated case data are contained in the User Guide For Electronic Child Support Payments, Using The Child Support Application Banking Convention, Version 9.0, revised February 24, 2017, hereby incorporated by reference, (http://www.flrules.org/Gateway/reference.asp?No=Ref-14350). A copy of the NACHA guidelines may be obtained at fl.smartchildsupport.com. The employer, the employer's financial institution, or the employer's processor providing ACH services may contact the State Disbursement Unit at fl.smartchildsupport.com for assistance in implementing the required formats, standards, and technical requirements.

(g) The employer or employer's processor may combine payments from more than one employee into a single payment, provided the employer or the employer's processor identifies the amount withheld for each employee.

(5) Procedures for ACH Debit.

(a) The employer or employer's processor must contact the State Disbursement Unit at fl.smartchildsupport.com to create an account using the employer's name, Employer Identification Number (EIN), and contact information.

(b) The employer or employer's processor must register a bank account and complete a micro deposit validation to verify the bank account.

(c) The employer or employer's processor must provide the SDU with the information stated in subparagraph (4)(c) for each employee for whom payments will be remitted, select a payment frequency and date, and authorize deductions from the registered bank account.

(d) The employer or employer's processor may contact the SDU at 1(888)-883-0743 for assistance with the actions required to remit support payments through ACH Debit.

(6) Remittance or Transmission Problems.

(a) If the employer or the employer's processor incorrectly submits associated case data or incorrectly remits support payments, the employer or the employer's processor must contact the SDU at 1(888)-883-0743 for specific instructions within one business day after the error is discovered.

(b) The State Disbursement Unit shall review payment errors and associated case data problems reported under paragraph (a), determine the course of action to correct errors, and process the information and payment as able.

(c) The State Disbursement Unit shall contact the employer or employer's processor as needed to correct errors identified by the SDU.

(7) The employer or employer's processor must remit payments within two business days after the date the employee is paid.

(8) Waiver From Electronic Filing Requirements. To request a waiver from the requirement to remit payments electronically, the employer must complete and submit the Electronic Remittance of Child Support Payments Request for Waiver (Form CS-FM42). Form CS-FM42, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx), is hereby incorporated by reference, effective xx/xx. The Department reviews written requests and responds to requesters using the Electronic Remittance of Child Support Payments Waiver Approval (Form CS-FM43) or Electronic Remittance of Child Support Payments Waiver Denial (Form CS-FM47) notice. Form CS-FM43, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx), is hereby incorporated by reference, effective xx/xx. Form CS-FM47, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx), is hereby incorporated by reference, effective xx/xx.

(9) Members of the public may obtain a copy of the forms used in this rule chapter, incorporated by reference, without cost, by writing to the Department of Revenue, Child Support Program, Attn: Forms Coordinator, P.O. Box 8030, Tallahassee, Florida 32314-8030.

*Rulemaking Authority 61.1824(6)(b), 409.2557(3)(o) FS. Law Implemented 61.1824(6) FS. History–New 5-31-07, Amended 9-18-08, 6-9-22,_____.*

**12E-1.039 Request for Services.**

(1) Definitions. For purposes of this rule:

(a) "Public assistance ~~recipient~~" is defined as provided in Section 409.2554(12) ~~means a person receiving temporary cash assistance under Section 414.095, F.S., Medicaid under Section 409.963, F.S., or food assistance under Section 414.31~~, F.S.

(b) "Alleged father" means "putative father" as defined by Section 409.256(1)(g), F.S.~~, which is an individual who is or may be the biological father of a child whose paternity has not been established and whose mother was unmarried when the child was conceived and born.~~

(c) "Caregiver" means a person, other than the mother, father, or a putative father, who has physical custody of a

child or with whom the child primarily resides.

(2) Services Provided. The Department establishes paternity; establishes, modifies, enforces, collects, and disburses support. The Department shall ~~will~~ initiate location activities to obtain address, asset, employment, health insurance, and other personal identifying information needed ~~in order~~ to provide services.

(3) Who can receive services ~~Eligibility~~.

(a) A parent, caregiver, or alleged father who needs ~~has a need for~~ services regarding a dependent child may apply for services.

(b) A public assistance recipient ~~receiving temporary cash assistance or food assistance~~ does not need to apply for services. A case is created automatically upon receipt of a referral from the Florida Department of Children and Families.

(c) To receive services, an individual who does not receive public assistance or who receives ~~A public assistance recipient receiving~~ only Medicaid ~~benefits~~ must submit a completed application as described in paragraph (4) ~~apply for services~~. ~~A case is not automatically created.~~

(d) A former recipient of public assistance or child support services whose case has been closed and who wants the Department to resume services must submit a completed ~~complete an~~ application.

(e) The Department provides services at the request of ~~other states~~ Title IV-D agencies from other states, child support agencies from foreign countries with which the State of Florida or the United States government has a reciprocal agreement for ~~regarding~~ child support, and central authorities from member ~~to child support agencies or the equivalent in~~ countries of ~~that have signed~~ The Hague Convention on the International Recovery of Child Support and Other Forms of Family Maintenance.

(f) The Department does not provide services to a minor child requesting ~~seeking to collect~~ support from a parent.

(g) The Department does not provide services to an adult requesting ~~seeking to collect~~ support from a parent for the time during which the adult ~~seeking to collect support~~ was a minor child ~~dependent~~.

(4) Application.

(a) To apply for services, an individual ~~who does not receive temporary cash assistance or food assistance~~ must submit a completed signed ~~and complete~~ electronic or paper application. For t~~T~~he Department to begin providing services, the applicant must provide at a minimum ~~will obtain information concerning parents and children including:~~ the name, address, and date of birth of the person applying for services, the first and last name of each parent or alleged

father, and the name and date of birth of each child for whom services are requested ~~Social Security Number, employment, health insurance, military service, and other relevant information necessary to provide child support services~~.

1. An individual may submit the Online Application for Child Support Services form CS-ES51b through the Department's website at floridarevenue.com. Form CS-ES51b, (http://www.flrules.org/Gateway/reference.asp?No=Ref-08649), is hereby incorporated ~~herein~~ by reference effective 09/19/2017. The Department shall ~~will~~ send an electronic confirmation message to the applicant once the application is processed and the case has been opened.

2. A paper ~~hardcopy~~ application may be obtained by calling 1(850)488-KIDS (5437) or contacting a child support local office. Local child support office information is provided on the Department's website floridarevenue.com.

a. Upon request, the Department shall ~~will~~ provide an individual who requests services with f~~F~~orms CS-ES51 and CS-ES50. Form CS-ES51, Application for Child Support Services, is hereby incorporated by reference effective 09/23, (http://www.flrules.org/Gateway/reference.asp?No=Ref-15871). Form CS-ES50, Application Instructions, is hereby incorporated by reference effective 12/21, (http://www.flrules.org/Gateway/reference.asp?No=Ref-13864). The applicant must complete and submit the CS-ES51 form provided.

b. When an applicant requests services for more than one child, the Department shall ~~will~~ provide the applicant with form CS-ES51ACI, ~~a~~ Child Information, ~~Form CS-ES51ACI,~~ for each additional child. Form CS-ES51ACI, (http://www.flrules.org/Gateway/reference.asp?No=Ref-15872), is hereby incorporated ~~herein~~ by reference, effective 09/23. The applicant must complete and submit the CS-ES51ACI form(s) provided.

c. When there is more than one alleged father, the Department shall ~~will~~ provide the applicant with a separate form CS-ES52, Other Parent Information, ~~Form CS-ES52,~~ for each alleged father.

Form CS-ES52, (http://www.flrules.org/Gateway/reference.asp?No=Ref-13867), is hereby incorporated ~~herein~~ by reference, effective 12/21. The applicant must complete and submit the CS-ES52 form(s) provided.

d. When the applicant is applying for services for more than one child with different fathers, the applicant must ~~will be required to~~ submit a separate application for each child and father.

(5) Supporting documents; additional requirements.

(a) An individual who applies for services under subsection (4) or who receives public assistance must:

1. Provide the Department with the ~~all~~ information needed ~~necessary~~ to provide ~~process the request for~~ services.

2. Provide the Department copies of all supporting documents, including as applicable,~~:~~ Final Judgment of Dissolution of Marriage, support order, birth certificate of child(ren) not born in Florida, paternity judgment, payment record, or written agreement between the applicant or public assistance recipient and the other parent concerning paternity, support, and parenting time, and other ~~relevant~~ documents upon request, as needed, ~~necessary~~ to provide child support services.

3. Provide a paternity declaration for each child who does not have a legal father.

a. The Department uses form CS-PO34, ~~the~~ Paternity Declaration, ~~Form CS-PO34,~~ for the mother and provides the form ~~to each parent~~ with the Application for Child Support Services. Form CS-PO34, (http://www.flrules.org/Gateway/reference.asp?No=Ref-13863), is hereby incorporated ~~herein~~ by reference, effective 12/21.

b. The Department uses form CS-PO102, ~~the~~ Paternity Statement by Non-Parent, ~~Form CS-PO102,~~ for ~~the non-parent~~ caregiver applicants. Form CS-PO102, (http://www.flrules.org/Gateway/reference.asp?No=Ref-08655), is hereby incorporated ~~herein~~ by reference effective, 09/19/2017.

c. The Department uses the Paternity Statement by Alleged Father, Form CS-PO103 for the alleged father. Form CS-PO103, (http://www.flrules.org/Gateway/reference.asp?No=Ref-12350), is hereby incorporated ~~herein~~ by reference, effective 11/20.

4. Provide a separate completed Father/Alleged Father Information form (CS-ES119) for each alleged father named on the paternity declaration. Form CS-ES119, (http://www.flrules.org/Gateway/reference.asp?No=Ref-13868), is hereby incorporated by reference, effective 12/21.

5. Provide the Department with proof of health insurance if the child(ren) is insured.

6. Inform the Department of any changes in information for himself or herself, the child(ren), or the other parent(s). This includes addresses, employment, phone numbers, and where the child(ren) resides.

7. Voluntarily submit to personal jurisdiction in Florida.

8. Cooperate with the Department as required by Rule 12E-1.008, F.A.C.

(6) Application and Referral Review.

(a) The Department shall ~~will~~ review applications submitted by an individual ~~who does not receive temporary cash assistance or food assistance~~ to determine whether the application is complete.

1. If the applicant returns some, but not all required information, or returns incomplete or inaccurate information,

the Department shall ~~will~~ send the applicant f~~F~~orm CS-ES54, Request for More Information, by regular mail, requesting the missing, incomplete, or corrected information. Form CS-ES54, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx), is hereby incorporated by reference, effective xx/xx. ~~09/19/2017, (http://www.flrules.org/Gateway/reference.asp?No=Ref-08657),~~

2. If the application is complete, the Department shall ~~will~~ send f~~F~~orm CS-ES55, Response to Request for Services and/or Information Request, to the applicant informing them that the application was received. When additional information is required for the Department to proceed, the CS-ES55 notifies, ~~will instruct~~ the applicant to provide the required information within 30 days after the date of the notice. Form CS-ES55, (http://www.flrules.org/Gateway/reference.asp?No=Ref-14353), is hereby incorporated by reference, effective 07/22.

3. The Department shall ~~will~~ close the request for services ~~case~~ if an application is not returned or completed within 65 calendar days after the Department begins the application review.

4. If there is a support order for one or more children named in the application, the Department shall mail the applicant form CS-ES54, Request for More Information, to inquire if the applicant wants the Department to review the support order for possible modification.

(b) The Department shall ~~will~~ review public assistance referrals received from the Florida Department of Children and Families to determine whether additional information or documents are required to provide services.

1. The Department shall ~~will~~ send form CS-ES56, ~~the~~ Information Needed to Provide Services, ~~Form CS-ES56,~~ to the public assistance recipient, informing them that a request to open a child support case was received and additional information is required for the Department to proceed. Form CS-ES56, (http://www.flrules.org/Gateway/reference.asp?No=Ref-14354), is hereby incorporated by reference, effective 07/22.

2. The Department shall send ~~will provide~~ the public assistance recipient f~~F~~orm CS-ES51ACI, Child Information, if there is more than one child in the household. The public assistance recipient must complete and submit the CS-ES51ACI form(s) provided.

3. The Department shall ~~will~~ notify the Department of Children and Families ~~Family Services~~ in accordance with Section 409.2572, F.S., if a recipient of ~~the~~ public assistance does not ~~recipient fails to~~ provide ~~all required~~ information needed by the Department to provide services.

*Rulemaking Authority 409.2557(3)(h), (i) FS. Law Implemented 409.2567 FS. History–New 9-19-17, Amended 8-28-19, 11-12-20, 11-21-21, 6-9-22, 9-14-23,_____.*

**12E-1.041 Review for Modification of Support Order.**

(1) Initiating a review.

(a) The Department automatically initiates a monthly review of support orders to determine if modification is appropriate for cases in which the parent due support is receiving cash assistance from the Department of Children and Families, the support order has not been reviewed under Section 409.2564(11), F.S., or modified for at least three years, and the Department has a mailing address for both parents, or caregiver, if applicable.

(b) No change.

(c) The Department begins a review by mailing the applicable forms to both parents when the review is initiated under (1)(a) or to the parent who requests a review under (1)(b).

1. If the support order under review is an administrative support order issued by the Department, the forms consist of the Declaration of Change in Circumstances (CS-POBB), the Financial Affidavit (CS-OA11), and the Parent Information Form (CS-OA12). If the case is eligible for a parenting time plan under Rule 12E-1.030, F.A.C., the Title IV-D Standard Parenting Time Plan (CS-OA250) is included. Form CS-POBB, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-15882~~), is hereby incorporated by reference, effective xx/xx ~~09/23~~. Forms CS-OA11 and CS-OA12 are incorporated in Rule 12E-1.036, F.A.C.

2. through 3. No change.

(d) through (g) No change.

(2) Conducting the review.

(a) Change in circumstances. ~~The requesting party must provide documentation showing a permanent, involuntary change of circumstance, which may include:~~

1. Proof or showing of a change in circumstances is not required if the support order was established, modified, or reviewed under Section 409.2564(11), F.S., more than three years before the review.

2. Documentation, which must include at a minimum a completed form CS-POBB, demonstrating a permanent, involuntary change in circumstance if the support order was established, modified, or reviewed under Section 409.2564(11), F.S., less than three years before the review. Documentation may include:

a~~1~~. A change in either parent's income. If the income of the parent who is ordered to pay support increases, the Department does not need to prove that the change is involuntary to proceed with support order modification.

b~~2~~. A parent begins receiving Social Security Disability Income.

c~~3~~. A parent or child becomes permanently disabled.

d~~4~~. A change in a parent's or child's medical condition results in a reduced ability to pay support or an increased need for support.

e~~5~~. An increased need for support.

(b) No change.

(c) The Department begins a proceeding to modify a support order when:

1. It has been three years or more since the most recent support order review under Section 409.2564(11), F.S., or since the support order was entered or last modified, and; the child support amount calculated during the review varies from the child support amount in the support order by at least 10 percent or a minimum of $25.00 per month~~; and there is a permanent, involuntary change in circumstances~~.

2. No change.

(d) The Department notifies the parents of the results of a completed support order review.

1. No change.

2. When a support order review indicates a judicial support order should be modified, the Department mails both parties the Results of Support Order Review form (CS-POBC). Form CS-POBC, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-15885)~~, is hereby incorporated by reference, effective xx/xx ~~09/23~~.

3. When the result of a review of an administrative support order issued by the Department is that the order should not be changed ~~reviewed and the review indicates there is not a substantial, permanent, or involuntary change in circumstances~~, the Department concludes the review by mailing the parties f~~F~~orm CS-POBC.

4. When a support order review indicates the Department is unable to proceed with support order modification for reasons other than those stated in f~~F~~orm CS-POBC, the Department concludes the review by mailing the parties the Results of Support Order Review form (CS-POBCa). Form CS-POBCa, (http://www.flrules.org/Gateway/reference.asp?No=Ref-15886), is hereby incorporated by reference, effective 09/23.

(3) Notice of right to request support order review and modification.

(a) If the mailing address of both parties is known, the Department mails the parties a Your Right to a Support Order Review form (CS-POBJ) at least once every three years in accordance with Section 409.2546(11), F.S. Form CS-POBJ, (http://www.flrules.org/Gateway/reference.asp?No=Ref-xxxxx ~~http://www.flrules.org/Gateway/reference.asp?No=Ref-15887~~), is hereby incorporated by reference, effective xx/xx ~~09/23~~.

(b) No change.

*Rulemaking Authority ~~61.13(1)(b)7., 61.14(1)(d),~~ 409.2557(3)(p), ~~409.2563(7)(e),~~ 409.2563(16), ~~409.25633(9)~~ FS. Law Implemented 61.30(1)(c), 409.2563, ~~409.25633,~~ 409.2564(11)(a) FS. History–New 9-14-23,_____.*