

NOTICE OF PROPOSED RULE ADOPTION

STATE OF MISSISSIPPI STATE BOARD OF HEALTH

MISSISSIPPI DEPARTMENT OF HEALTH
OFFICE OF EMERGENCY PLANNING &
RESPONSE

c/o Art Sharpe
P.O. Box 1700
570 E. Woodrow Wilson
Jackson, MS 39215
601-576-7680
arthur.sharpe@msdh.state.ms.us

Specific Legal Authority authorizing the promulgation of
Rule: _____

Reference to Rules repealed, amended or suspended by the
Temporary Rule:

Mississippi EMS: The Law, Rules and Regulations

Explanation of the Purpose of the Proposed Rule and the reason(s) for the rule:

To update "Mississippi EMS: The Law, Rules and Regulations" to allow the escrow of EMSOF funds for a period of three years and to allow for the Initiation and Management of CPap and BiPap in the prehospital setting.

This rule is proposed as a (x) Final Rule, and/or a () Temporary Rule (Check one or both boxes as applicable.)

Persons may present their views on the proposed rule by addressing written comments to the agency at the address above. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.

Oral Proceeding (Check one box below):

An oral proceeding is scheduled on this rule on January 4, 2008 at 9:00 a.m. at the Mississippi Department of Health – Osborne Health Protection Conference Room O-320 in Jackson, MS.

If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least five (5) days prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the parties you represent.

An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this Notice of Proposed Rule Adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.

Economic Impact Statement (Check one box below):

The agency has determined that an economic impact statement is not required for this rule, or
The concise summary of the economic impact statement required is attached.

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

Date Rule Proposed: **December 4, 2007**

Proposed Effective Date: **February 23, 2008**



Arthur C. Sharpe, Jr., Director
Office of Emergency Planning and Response

Summary of Changes to:

Title 15 - Mississippi Department of Health

Part III – Office of Health Protection

Subpart 31 – Bureau of Emergency Medical Services

EMERGENCY MEDICAL TECHNICIAN ADVANCED LEVEL SUPPORT

- **Chapter 8, Section 104.01 – Performance Standards for Emergency Medical Technicians-Advanced Level Support**

EMERGENCY MEDICAL SERVICES OPERATING FUND

- **Chapter 9, Section 100.04 – Eligible Uses of EMSOF Funds**