

Mississippi Secretary of State
700 North Street P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Public Employees' Retirement System		CONTACT PERSON Jane L. Mapp	TELEPHONE NUMBER 601-359-3592	
ADDRESS 429 Mississippi Street		CITY Jackson	STATE MS	ZIP 39201
EMAIL JMapp@pers.ms.gov	SUBMIT DATE 12/19/2012	Name or number of rule(s): Regulation 35		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal

The proposed amendments to Regulation 35 are to: 1. Amend § 101.2.b to incorporate the changes to the names and numbers of the forms that comprise the Application for Disability Retirement; 2. Add §§ 101.3.f, 101.3.g, 101.3.i, and 101.3.j to incorporate certain existing rules relative to the payment of dependent child survivor benefits; and 3. Add § 101.3.h to (1) terminate the dependent child survivor benefit when a child is no longer enrolled as a full-time student (i.e., similar to the rule that is already in place relative to a child who marries), (2) cease the long-standing practice of suspending and subsequently reinstating dependent child survivor benefits when a child withdraws from school and later reenrolls, and (3) grant the executive director the discretionary authority to approve the reinstatement of the dependent child survivor benefits in certain limited circumstances. Specific legal authority authorizing the promulgation of rule: 25-11-15(6)

List all rules repealed, amended, or suspended by the proposed rule: Regulation 35

ORAL PROCEEDING:

An oral proceeding is scheduled for this rule on Date: _____ Time: _____ Place: _____

Presently, an oral proceeding is not scheduled on this rule.

If an oral proceeding is not scheduled, an oral proceeding must be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) or more 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, email address, and telephone number of the person(s) making the request; and, if you are an agent or attorney, the name, address, email address, and telephone number of the party or parties you represent. At any time within the twenty-five (25) day public comment period, written submissions including arguments, data, and views on the proposed rule/amendment/repeal may be submitted to the filing agency.

ECONOMIC IMPACT STATEMENT:

Economic impact statement not required for this rule. Concise summary of economic impact statement attached.

TEMPORARY RULES	PROPOSED ACTION ON RULES	FINAL ACTION ON RULES
<input type="checkbox"/> Original filing <input type="checkbox"/> Renewal of effectiveness To be in effect in _____ days Effective date: <input type="checkbox"/> Immediately upon filing <input type="checkbox"/> Other (specify): _____	Action proposed: <input type="checkbox"/> New rule(s) <input type="checkbox"/> Amendment to existing rule(s) <input type="checkbox"/> Repeal of existing rule(s) <input type="checkbox"/> Adoption by reference Proposed final effective date: <input type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify): _____	Date Proposed Rule Filed: <u>10/24/2012</u> Action taken: <input checked="" type="checkbox"/> Adopted with no changes in text <input type="checkbox"/> Adopted with changes <input type="checkbox"/> Adopted by reference <input type="checkbox"/> Withdrawn <input type="checkbox"/> Repeal adopted as proposed Effective date: <input type="checkbox"/> 30 days after filing <input checked="" type="checkbox"/> Other (specify): <u>Feb. 1, 2013</u>

Printed name and Title of person authorized to file rules: Jane L. Mapp, Special Assistant Attorney General

Signature of person authorized to file rules: */s/ Jane L. Mapp*

<p>OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>Accepted for filing by</p>	<p align="center">DO NOT WRITE BELOW THIS LINE</p> <p align="center">OFFICIAL FILING STAMP</p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>Accepted for filing by</p>	<p align="center">OFFICIAL FILING STAMP</p> <p align="center" style="font-size: 2em; color: blue;">FILED</p> <p align="center" style="color: red; font-weight: bold;">DEC 19 2012</p> <p align="center" style="color: blue; font-weight: bold;">MISSISSIPPI SECRETARY OF STATE</p> <p>Accepted for filing by <i>[Signature]</i></p>
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