

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

**ADMINISTRATIVE PROCEDURES NOTICE FILING**

AGENCY NAME Mississippi State Department of Health		CONTACT PERSON Mitchell Adcock	TELEPHONE NUMBER 601-576-7847	
ADDRESS PO Box 1700		CITY Jackson	STATE MS	ZIP 39215
EMAIL bob.fagan@msdh.state.ms.us	SUBMIT DATE 5/29/14	Name or number of rule(s): Regulations Governing Licensure of Occupational Therapists and Occupational Therapy Assistants		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Regulations Governing Licensure of Occupational Therapists and Occupational Therapy Assistants are being amended to eliminate unnecessary wording or Rule, add sources of continuing education, technical amendments, and correction of scrivener's errors.

Specific legal authority authorizing the promulgation of rule: §73-24-13

List all rules repealed, amended, or suspended by the proposed rule: Rule 8.1.13 (10, 11, 13), Rule 8.2.2, Rule 8.4.5 (1 & 4), Rule 8.4.6 (3 & 4), Rule 8.5.2, Rule 7.6.2 (3), Rule 8.7.1, Rule 8.7.2 (1), Rule 8.7.4 (1c, 2, & 6), Rule 8.9.2, Rule 8.10.2 (1 & 2), and Rule 8.12.2 (7)

**ORAL PROCEEDING:**

An oral proceeding is scheduled for this rule on Date: July 2, 2014 Time: 9:00 a.m. Place: MSDH Osborne Auditorium

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 checked="" 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 checked="" type="checkbox"/> 30 days after filing <input type="checkbox"/> Other (specify): _____	Date Proposed Rule Filed: _____ Action taken: <input 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 type="checkbox"/> Other (specify): _____

Printed name and Title of person authorized to file rules: Mitchell Adcock, Deputy State Health Officer/Chief Administrative Officer

Signature of person authorized to file rules: *Mitchell Adcock*

<p><b>OFFICIAL FILING STAMP</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>Accepted for filing by</p>	<p><b>DO NOT WRITE BELOW THIS LINE</b> <b>OFFICIAL FILING STAMP</b></p> <div style="border: 1px solid black; padding: 10px;"> <p align="center"><b>FILED</b> MAY 29 2014 MISSISSIPPI SECRETARY OF STATE</p> </div> <p>Accepted for filing by <u>#20576 <i>AW</i></u></p>	<p><b>OFFICIAL FILING STAMP</b></p> <div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>Accepted for filing by</p>
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The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.



DELBERT HOSEMANN  
Secretary of State

**CONCISE SUMMARY OF ECONOMIC IMPACT STATEMENT**

An Economic Impact Statement is required for this proposed rule by Section 25-43-3.105 of the Administrative Procedures Act. This is a Concise Summary of the Economic Impact Statement which must be filed with the Secretary of State's Office.

AGENCY NAME Mississippi State Department of Health	CONTACT PERSON Mitchell Adcock	TELEPHONE NUMBER 601-576-7847
ADDRESS PO Box 1700/570 E Woodrow Wilson Blvd.	CITY Jackson	STATE MS
EMAIL <a href="mailto:bob.fagan@msdh.state.ms.us">bob.fagan@msdh.state.ms.us</a>	DESCRIPTIVE TITLE OF PROPOSED RULE Regulations Governing Licensure of Occupational Therapists and Occupational Therapy Assistants	
Specific Legal Authority Authorizing the promulgation of Rule: Section 73-24-13	Reference to Rules repealed, amended or suspended by the Proposed Rule: Rule 8.1.13 (10, 11, 13), Rule 8.2.2, Rule 8.4.5 (1 & 4), Rule 8.4.6 (3 & 4), Rule 8.5.2, Rule 7.6.2 (3), Rule 8.7.1, Rule 8.7.2 (1), Rule 8.7.4 (1c, 2, & 6), Rule 8.9.2, Rule 8.10.2 (1& 2), and Rule 8.12.2 (7)	

**A. Estimated Costs and Benefits**

1. Briefly summarize the benefits that may result from this regulation and who will benefit:

Regulations Governing Licensure of Occupational Therapists and Occupational Therapy Assistants are being amended to eliminate unnecessary wording or Rule, add sources of continuing education, technical amendments, and correction of scrivener's errors. Licensees will be the major beneficiaries of the amendments.

2. Briefly describe the need for the proposed rule:

The proposed rule is necessary to eliminate unnecessary wording or Rule, add sources of continuing education, technical amendments, and correction of scrivener's errors.

3. Briefly describe the effect the proposed action will have on the public health, safety, and welfare:

There will be no overall effect on the health, safety, and welfare of the citizens of Mississippi.

4. Estimated Cost of implementing proposed action:

- a. To the agency  
 Nothing    Minimal    Moderate    Substantial    Excessive
- b. To other state or local government entities  
 Nothing    Minimal    Moderate    Substantial    Excessive

5. Estimated Cost and/or economic benefit to all persons directly affected by the proposed rule:

- c. Cost:  
 Nothing    Minimal    Moderate    Substantial    Excessive
- d. Economic Benefit:  
 Nothing    Minimal    Moderate    Substantial    Excessive

6. Estimated impact on small businesses:

Nothing  Minimal  Moderate  Substantial  Excessive

- a. Estimate of the number of small businesses subject to the proposed regulation: N/A  
b. Projected costs for small businesses to comply: \$0  
c. Statement of probable effect on impacted small businesses: Nothing

7. The cost of adopting the rule compared to not adopting the rule or significantly amending the existing rule (check option):

substantially less than  moderately less than  minimally less than  
 the same as  minimally more than  moderately more than  
 substantially more than  excessively more than

8. The benefit of adopting the rule compared to not adopting the rule or significantly amending the existing rule (check option):

substantially less than  moderately less than  minimally less than  
 the same as  minimally more than  moderately more than  
 substantially more than  excessively more than

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B. Reasonable Alternative Methods

1. Other than adopting this rule, are there less costly or less intrusive methods for achieving the purpose of the proposed rule?

yes  no

2. If yes, please briefly describe available, reasonable alternative(s) and the reasons for rejecting those alternatives in favor of the proposed rule. (Please see §25-43-4.104 for factors you must consider.)

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C. Data and Methodology

1. Please briefly describe the data and methodology you used in making the estimates required by this form.

The Occupational Therapist and Occupational Therapy Assistant licensure statute and regulations were thoroughly reviewed. Input on proposed amendments were presented to, discussed with, and voted on by the MSDH Occupational Therapist Advisory Council.

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D. Public Notice

1. Where, when, and how may someone present their views on the proposed rule and request an oral proceeding on the proposed rule if one is not already scheduled?

An Oral Proceeding is scheduled for July 2, 2014, at 9:00 a.m., in the Osborne Auditorium located at 570 E Woodrow Wilson Blvd., Jackson, MS

SIGNATURE 	TITLE Deputy State Health Officer/Chief Administrative Officer
DATE 5/29/14	PROPOSED EFFECTIVE DATE OF RULE 30 days after final filing