

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

**ADMINISTRATIVE PROCEDURES NOTICE FILING**

AGENCY NAME Mississippi Department of Insurance		CONTACT PERSON Kimberly Causey	TELEPHONE NUMBER (601) 359-3577	
ADDRESS P.O. Box 79		CITY Jackson	STATE MS	ZIP 39205
EMAIL Kim.causey@mid.ms.gov	SUBMIT DATE 11/10/15	Name or number of rule(s): Title 19, Part 8, Chapter 1, Rule 16 "Fee Schedule"		

**Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal:** This Regulation amends existing 19 Miss. Admin. Code, Part 8, Chapter 1, Rule 1.16, "Fee Schedule" to increase certain fees.

**Specific legal authority authorizing the promulgation of rule:** MCA § 25-43-3.112; §§ 45-45-1 et seq ; §83-5-1

**List all rules repealed, amended, or suspended by the proposed rule:** Title 19, Part 8, Chapter 1, Rule 1.16 is amended.

**ORAL PROCEEDING:**

- An oral proceeding is scheduled for this rule on Date \_\_\_\_\_
- 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
___ Original filing ___ Renewal of effectiveness To be in effect in ___ days Effective date: ___ Immediately upon filing ___ Other (specify): ___	<b>Action proposed:</b> ___ New rule(s) <input checked="" type="checkbox"/> Amendment to existing rule(s) ___ Repeal of existing rule(s) ___ Adoption by reference <b>Proposed final effective date:</b> <input checked="" type="checkbox"/> 30 days after filing ___ Other (specify): ___	<b>Date Proposed Rule Filed:</b> <b>Action taken:</b> ___ Adopted with no changes in text Adopted with changes ___ Adopted by reference ___ Withdrawn ___ Repeal adopted as proposed <b>Effective date:</b> ___ 30 days after filing ___ Other (specify): ___

Printed name and Title of person authorized to file rules: Kimberly Causey, Special Assistant Attorney General

Signature of person authorized to file rules: *Kimberly Causey*

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
<div style="border: 1px solid black; height: 100px; width: 100%;"></div> Accepted for filing by _____	<div style="border: 1px solid black; padding: 10px; text-align: center;">  </div> Accepted for filing by <i>#21651</i> <i>[Signature]</i>	<div style="border: 1px solid black; height: 100px; width: 100%;"></div> Accepted for filing by _____

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 INSURANCE DEPARTMENT	CONTACT PERSON KIMBERLY CAUSEY	TELEPHONE NUMBER 601-359-3577	
ADDRESS 501 N. WEST ST., STE 1001	CITY JACKSON	STATE MS	ZIP 39201
EMAIL kim.cause@mid.ms.gov	DESCRIPTIVE TITLE OF PROPOSED RULE Mississippi Safety Conveyances Act, Fee Schedule		
Specific Legal Authority Authorizing the promulgation of Rule: MCA § 25-43-3.112; §§ 45-45-1 et seq ; §83-5-1	Reference to Rules repealed, amended or suspended by the Proposed Rule: Amends 19 Miss. Admin. Code, Part 8, Chapter 1, Rule 1.16		

**A. Estimated Costs and Benefits**

1. Briefly summarize the benefits that may result from this regulation and who will benefit: The amendment to this rule will increase the already prescribed fee for safety conveyances permits by Ten Dollars (\$10.00). Thus far 159 safety conveyances permits have been issued by MID in calendar year 2015.
  
2. Briefly describe the need for the proposed rule: In order to increase the efficiency in issuing permits, MID has contracted with a software provider to provide for a web-based service for the collection of fees and issuances of permits. The cost of this service is Ten Dollars (\$10.00) a permit. MID is amending its current regulation to include this additional cost to the permit fee.
  
3. Briefly describe the effect the proposed action will have on the public health, safety, and welfare:  
Safety conveyances permits will be issued more quickly and efficiently. This software program will also assist MID in establishing a registry of all safety conveyances in this state.
  
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: Only small businesses that have or will have a safety conveyance would be affected. MID is unable to determine the number of small businesses that have a safety conveyance in its workplace.

b. Projected costs for small businesses to comply: If a small business needs a permit for a safety conveyance, this amendment would merely increase the existing fee by \$10.00.

c. Statement of probable effect on impacted small businesses: There should be no to minimal impact on a small business.

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. MID reviewed the number of permits it has issued so far in calendar year 2015, which is 159 permits, as the basis for the estimates provided.

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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? Any interested person may contact MID through the contact person provided above.

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SIGNATURE 	TITLE SPECIAL ASSISTANT ATTORNEY GENERAL
DATE 11/10/2015	PROPOSED EFFECTIVE DATE OF RULE: 1/7/16