SOS APA Form 001

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

## ADMINISTRATIVE PROCEDURES NOTICE FILING

| AGENCY NAME | | CONTACT PERSON | TELEPHONE NUMBER | |
|---|---|---|---|---|
| Public Employees' Retirement System | | Jane L. Mapp | 601-359-3592 | |
| ADDRESS | | CITY | STATE | ZIP |
| 429 Mississippi Street | | Jackson | MS | 39201 |
| EMAIL | SUBMIT | Name or number of rule(s): | | |
| JMapp@pers.ms.gov | 08/31/16 | Regulation 49 | | |

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: The proposed amendment to Regulation 49 would update the language to reflect changes made in House Bill 899 (Regular Session 2016). Amend § 101 to insert reference to the Heroes Earnings Assistance and Relief Tax Act of 2008 (HEART Act) provisions in the Background Information section. Establish § 104 to add the HEART Act Provisions as found in House Bill 899. The HEART Act provides additional benefits to those who leave covered service for a military leave of absence and die while performing qualified military service. The HEART Act also includes provisions for treating differential wage payments as compensation. The effective date of the proposed amendments will be October 1, 2016.
Specific legal authority authorizing the promulgation of rule: 25-11-15(6)
List all rules repealed, amended, or suspended by the proposed rule: Regulation 49

### ORAL PROCEEDING:

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

X 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:

X 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 | **Action proposed:** | **Date Proposed Rule Filed:** 06/30/16 |
| _____ Renewal of effectiveness | _____ New rule(s) | **Action taken:** |
| To be in effect in _____ days | _____ Amendment to existing rule(s) | _____ Adopted with no changes in text |
| Effective date: | _____ Repeal of existing rule(s) | _X_ Adopted with changes |
| _____ Immediately upon filing | _____ Adoption by reference | _____ Adopted by reference |
| _____ Other (specify): _____ | **Proposed final effective date:** | _____ Withdrawn |
| | _____ 30 days after filing | _____ Repeal adopted as proposed |
| | _____ Other (specify): _____ | **Effective date:** |
| | | _____ 30 days after filing |
| | | _X_ Other (specify): 10/01/16 |

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

| OFFICIAL FILING STAMP | DO NOT WRITE BELOW THIS LINE<br>OFFICIAL FILING STAMP | OFFICIAL FILING STAMP |
|---|---|---|
| | | FILED<br>AUG 3 1 2016<br>MISSISSIPPI<br>SECRETARY OF STATE |
| Accepted for filing by | Accepted for filing by | Accepted for filing by<br>#2227 |

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