Mississippi Secretary of State

125 S. Congress Street, Jackson, MS 39201

ADMINISTRATIVE PROCEDURES NOTICE FILING

ADMINISTRATIVE PROCEDURES	NOTICE FILING	G				
AGENCY NAME MS State Department of Health		CONTACT PERSON Kris Adcock	TELEPHONE NUMBER 601-576-7847			
ADDRESS P O Box 1700		CITY Jackson		STATE MS	ZIP 39215 -1700	
EMAIL SUBMIT Christina.adcox@msdh.ms.gov DATE 8/8/2023		Name or number of rule(s): Title 15, Part 19, Subpart 60, Chapter 6 – Regulations Governing Licensure of Hearing Aid Specialists				
Short explanation of rule/amendment/	repeal and reaso	n(s) for proposing rule/amendme	 nt/repeal: A	mended Rules	s to be consistent	
with the rest of licensed facility regulat	ons in the Office	of Licensure, Mississippi State De	partment o	f Health.		
Specific legal authority authorizing the	promulgation of	rule: 73-14-1				
List all rules repealed, amended, or sus 6.8.6, 6.12.1, 6.12.2, 14.1.1	pended by the pr	roposed rule: Rule 6.1.1, 6.1.3, 6.1	4, 6.4.2, 6.4	4.3, 6.4.4, 6.6.	2, 6.7.4, 6.8.1,	
ORAL PROCEEDING:						
An oral proceeding is scheduled for https://us06web.zoom.us/j/84309807565 Presently, an oral proceeding is not			Place: <u>ZOON</u>	<u>/</u>		
If an oral proceeding is not scheduled, an oral protein (10) or more persons. The written request shootice of proposed rule adoption and should inclagent or attorney, the name, address, email addromment period, written submissions including a	ould be submitted to ude the name, addre ess, and telephone n	o the agency contact person at the above a ss, email address, and telephone number umber of the party or parties you represe	address within of the person(s	twenty (20) days s) making the reque within the twen	after the filing of this uest; and, if you are an ty-five (25) day public	
ECONOMIC IMPACT STATEMENT:	<u> </u>		· · · · · ·		5 6 7	
Economic impact statement not rec	uired for this rul	e. Concise summary of ecc	onomic impa	act statement	attached.	
TEMPORARY RULES	PRO	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):	Ne Re Ac Proposed X 30	Action proposed: New rule(s) X Amendment to existing rule(s) Repeal of existing rule(s) Adoption by reference Proposed final effective date: x 30 days after filing Other (specify):		Date Proposed Rule Filed: // Action taken: Adopted with no changes in text Adopted with changes Adopted by reference Withdrawn Repeal adopted as proposed Effective date: 30 days after filing Other (specify):		
Printed name and Title of person a			•			
Signature of person authorized to	DO N	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP				
OFFICIAL FILING STAMP				OFFICIAL FILING STAMP		
Accepted for filing by	Accepted for filing by Accepted for filing by		Accepted for filing by			

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