

Mississippi Secretary of State

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME Mississippi Board of Nursing		CONTACT PERSON Deanne Saltzman	TELEPHONE NUMBER 601-957-6269	
ADDRESS 713 S Pear Orchard Rd		CITY Ridgeland	STATE MS	ZIP 39157
EMAIL dsaltzman@msbn.ms.gov	SUBMIT DATE 03/29/23	Name or number of rule(s): COMPILATION—Title 30, Part 2840 Advanced Practice, Rule 1.3 Monitored Practice		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: The MS Board of Nursing identifies Monitored Practice Hours as overly-restrictive of the APRN's practice and seeks to renew the temporary suspension of same until proposed action on rules can be finally promulgated.

Specific legal authority authorizing the promulgation of rule: Miss. Code Ann. § 73-15-17(a), 25-43-3.108

List all rules repealed, amended, or suspended by the proposed rule: Temporarily Suspends 30 Miss. Code Ann. Pt. 2840, R. 1.3

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
_____ Original filing ☒ Renewal of effectiveness To be in effect in <u>120</u> days Effective date: ☒ Immediately upon filing _____ Other (specify): _____	Action proposed: _____ New rule(s) _____ Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed final effective date: _____ 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 authorized to file rules: Deanne Saltzman

Signature of person authorized to file rules: /s/ Deanne Saltzman

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
		
Accepted for filing by <u>26285</u> <u>YBA</u>	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.