Mississippi Secretary of State

125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME		CONTACT PERSON	TELEPHONE NUMBER	
Mississippi Department of Mental Health		Nancy Luke	601-359-4465	
ADDRESS		CITY	STATE	ZIP
1001 Robert E. Lee Bldg./239 North Lamar Street		Jackson	MS	39201
EMAIL		Name or number of rule(s):		
Nancy.luke@dmh.ms.gov	03/26/26	Agency: Mississippi Department of Mental Health Title 24; Part 3 – DMH PLACE Professional Credentialing Rules and Requirements		

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Title 24; Part 3 – Updating current 2017 document to reflect changes in a credential name, additional program, new online system usage

Specific legal authority authorizing the promulgation of rule: Section 41-4-7 of the Mississippi Code, 1972, Annotated

List all rules repealed, amended, or suspended by the proposed rule: Title 24, Part 3, Chapters 1-20 of prior document DMH PLACE Professional Credentialing Rules and Requirements

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

_____Original filing
_____ Renewal of effectiveness
To be in effect in ____ days
Effective date:_____
_____ Immediately upon filing
_____Other (specify): _____

PROPOSED ACTION ON RULES

Action proposed:
_____ New rule(s)
__X__ Amendment to existing rule(s)
_____ Repeal of existing rule(s)
_____ Adoption by reference
Proposed final effective date:
_____ 30 days after filing
__X__ Other (specify): 7/1/2026

FINAL ACTION ON RULES

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: Cyndi Eubanks, Chief General Counsel

Signature of person authorized to file rules: Cyndi Eubanks

OFFICIAL FILING STAMP

Accepted for filing by

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FILED
MAR 26 2026
MISSISSIPPI
SECRETARY OF STATE

Accepted for filing by
25558 YBH

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