

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

ADMINISTRATIVE PROCEDURES NOTICE FILING

AGENCY NAME <u>Mississippi Board of Pharmacy</u>		CONTACT PERSON <u>AJecia Wasson</u>		TELEPHONE NUMBER <u>601-605-5388</u>	
ADDRESS <u>204 Key Drive Suite C</u>		CITY <u>Madison</u>		STATE <u>MS</u>	ZIP <u>39110</u>
EMAIL <u>awasson@mbp.ms.gov</u>	SUBMIT DATE <u>10/4/12</u>	Name or number of rule(s): <u>Compilation</u>			

Short explanation of rule/amendment/repeal and reason(s) for proposing rule/amendment/repeal: Addition of definition for electronic prescription, Article IV addition of electronic CE approval, Article XVI-addition of controlled substance registration requirements, Article XXXI-changes to compounding guidelines, Article XXXVII-Changes to DME registrations.
Specific legal authority authorizing the promulgation of rule: 73-21-81 MS Code of 1972

List all rules repealed, amended, or suspended by the proposed rule: Definitions, Article IV, Article XVI, Article XXXI, and

ORAL PROCEEDING: Article XXXVII

☐ 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 _____ days Effective date: _____ Immediately on _____ Other (specify): _____	Action proposed: _____ New rule(s) <input checked="" type="checkbox"/> Amendment to existing rule(s) _____ Repeal of existing rule(s) _____ Adoption by reference Proposed date of adoption: <input checked="" type="checkbox"/> 30 days after filing _____ Other (specify): _____	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: Frank Gammill Jr Executive Director

Signature of person authorized to file rules: *Frank Gammill Jr*

OFFICIAL FILING STAMP	DO NOT WRITE BELOW THIS LINE OFFICIAL FILING STAMP	OFFICIAL FILING STAMP
		
Accepted for filing by _____	Accepted for filing by <u><i>8/2/19/102</i></u>	Accepted for filing by _____

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