



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
Nellie M. Gorbea, *Secretary of State*

**Rules and Regulations Filing Form**

**1. Agency Name and Address**  
Department of Health

Cannon Building Three Capitol Hill Providence

**2. Title of Rule**  
Rules and Regulations Pertaining to Drug Product Selection

**3. Statutory Source of Authority**  
Chapter 21-31 of the Rhode Island General Laws, as amended

**4. Concise Explanatory Statement - §42-35-2.3**  
For the purpose of establishing the criteria for the determination of drug product selection

**5. Type of Filing**

<b>Emergency Rules</b>	
<input type="checkbox"/> A1. Emergency 120-day initial - §42-35-3(b) <input type="checkbox"/> Adoption <input type="checkbox"/> Amendment of ERLID: <input type="checkbox"/> Repeal of ERLID: Brief Statement of Reason for Finding Imminent Peril §42-35-3(b)(2):	<input type="checkbox"/> A2. Emergency 90-day renewal - §42-35-3(b) <input type="checkbox"/> Adoption <input type="checkbox"/> Amendment Indicate ERLID of 120-day initial:

<b>Final Rules</b>			
<input type="checkbox"/> B1. Amendment Supersedes ERLID:	<input type="checkbox"/> B2. Adoption Repeals ERLID:	<input type="checkbox"/> B3. Repeal Expires ERLID:	<input type="checkbox"/> C. Technical Revision
If B1 or C, please indicate new, amended, deleted, or revised sections:			

**6. Notice and Hearing Information**  
Date of Public Notice - §42-35-3(a)(1):12/02/2001  
Date of Public Hearing - §42-35-3(a)(2):Hearing Not Required  
End of Comment Period:

**7. Agency Additional Information - Web Page**

**8. Certification**

*I hereby certify that the attached rules and regulations were adopted in accordance with the Administrative Procedures Act (42-35) and that they are true copies of this Department, attest,*

\_\_\_\_\_  
Name  
\_\_\_\_\_  
Title

\_\_\_\_\_  
Notary Public  
Subscribed and sworn before me  
this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_