



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**

**Health, Department of**  
 Cannon Building - 3 Capitol Hill - Providence, RI 02908-5097

**2. Title of Rule**

Rules and Regulations Pertaining to The Regional Health Information Organization And Health Information Exchange [R5-37.7-HIE]

**3. Statutory Source of Authority**

RIGL 5-37.7

**4. Concise Explanatory Statement - §42-35-2.6**

Promulgation of regulations to implement the provisions of RIGL 5-37.7 regarding regulatory oversight of the Regional Health Information Organization [RHIO] & Health Information Exchange [HIE]. These regulations are promulgated pursuant to authority under RIGL 5-37.7-5.

**5. Type of Filing**

Emergency Rules	
<p>A1. Emergency 120-day initial - §42-35-2.10</p> <p><input type="checkbox"/> Adoption</p> <p><input type="checkbox"/> Amendment of ERLID:</p> <p><input type="checkbox"/> Repeal of ERLID:</p>	<p>A2. Emergency 60-day renewal - §42-35-2.10</p> <p><input type="checkbox"/> Adoption</p> <p><input type="checkbox"/> Amendment</p> <p><input type="checkbox"/> Repeal</p> <p>Indicate ERLID of 120-day initial:</p>
<p>Brief Statement of Reason for Finding Imminent Peril §42-35-2.10:</p>	

Final Rules		
<p><input type="checkbox"/> B1. Amendment - §42-35-3(a)</p> <p><input type="checkbox"/> C. Technical Revision</p>	<p><input checked="" type="checkbox"/> B2. Adoption - §42-35-3(a)</p> <p><input type="checkbox"/> D. Direct Final Rule - §42-35-2.11</p>	<p><input type="checkbox"/> B3. Repeal - §42-35-3(a)</p>
<p>If B1 or C, please indicate new, amended, deleted, or revised sections:</p>		

**6. Notice and Hearing Information**

Date of Public Notice - §42-35-2.8:04/03/2009  
 Date of Public Hearing - §42-35-2.8:05/12/2009  
 End of Comment Period - §42-35-2.8 :05/26/2009

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

<http://www.health.ri.gov/regulations/index.php>

**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 \_\_\_\_\_, \_\_\_\_\_