

## **Rules and Regulations Filing Form**

## 1. Agency Name and Address

Behavioral Healthcare, Developmental Disabilities and Hospitals, Department of

Barry Hall, 14 Harrington Rd., Cranston, RI 02920

## 2. Title of Rule

Rules and Regulations for the Licensing of Developmental Disability Organizations - Part III Provision of Core Services and Participants' Eligibility and Access to Services

## 3. Statutory Source of Authority

Rhode Island General Laws 40.1-24-1 et. seq.

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

These are technical revisions to fix the page numbering of the document and the table of contents to reflect the correct page numbers. No substantive changes are being made at this time.

5. Type of Filing	
Emergency Rules	
A1. Emergency 120-day initial - §42-35-2.10  Adoption Amendment of ERLID: Repeal of ERLID:	A2. Emergency 60-day renewal - §42-35-2.10  Adoption  Amendment  Repeal  Indicate ERLID of 120-day initial:
Brief Statement of Reason for Finding Imminen	Peril §42-35-2.10:
☐ B1. Amendment - §42-35-3(a) ☐ C. Technical Revision Supersedes ERLID: 7177 If B1 or C, please indicate new, amended, delete Table of Contents and Page Numbers fixed to re	
6. Notice and Hearing Information  Date of Public Notice - \$42-35-2.8:Notice Not R  Date of Public Hearing - \$42-35-2.8:Hearing Not  End of Comment Period - \$42-35-2.8:  7. Agency Additional Information - Web Page  http://www.bhddh.ri.gov	
8. Certification I hereby certify that the attached rules and regulacionies of this Department, attest,	tions were adopted in accordance with the Administrative Procedures Act (42-35) and that they are true
Name	Notary Public Subscribed and sworn before me this day of .