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Sequence Number: 05-10-0

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05/13/2009

## **Notice of Rulemaking Hearing**

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204. For questions and copies of the notice, contact the person listed below.

Agency/Board/Commission:	Board of Nursing
Division:	Health Related Boards
Contact Person:	Alison G. Cleaves, Deputy General Counsel
Address:	Plaza One, Suite 210, 220 Athens Way, Nashville, Tennessee 37243
Phone:	(615) 741-1611
Email:	Alison.Cleaves@tn.gov

Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

ADA Contact:	ADA Coordinator at the Division of Health Related Boards
Address:	227 French Landing, Heritage Place, Nashville, Tennessee 37243
Phone:	(615) 532-4397
Email:	

Hearing Location(s) (for additional locations, copy and paste table)

Address 1:	Iris Conference Room
Address 2:	227 French Landing, Heritage Place, Nashville, Tennessee 37243
City:	Nashville, Tennessee
Zip:	37243
Hearing Date:	September 25, 2009
Hearing Time:	9:00AM _X_CST _EST

### **Additional Hearing Information:**

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Rev	vision Type (check all that apply):
X	Amendment
	Alam

Rule(s) (ALL chapters and rules contained in filing must be listed here. If needed, copy and paste additional tables. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
1000-01	Rules and Regulations of Registered Nurses
Rule Number	Rule Title
1000-0112	Fees

Repeal

Chapter Number	Chapter Title	Annual Park
1000-02	Rules and Regulations of Licensed Practical Nurses	St. server
Rule Number	Rule Title	Automotive
1000-0212	Fees	

Notice of Rulemaking
for the
Board for Nursing
Division of Health Related Boards
Bureau of Health Licensure and Regulation

Chapters 1000-01 and 1000-02

#### Amendments

Paragraph (e) of Rule 1000-01-.12 Fees is amended by deleting this paragraph in its entirety and substituting instead the following:

(e) R.N. Renewal

\$90.00

Authority: T.C.A. §63-7-207(4).

Paragraph (e) of Rule 1000-02-.12 Fees is amended by deleting this paragraph in its entirety and substituting instead the following:

(e) L.P.N. Renewal

\$90.00

Authority: T.C.A. §63-7-207(4).

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date: 5 (3/0

Signature:

Name of Officer: Alison G. Cleaves

Title of Officer: Deputy General Counsel

Subscribed and sworn to before me on: 5/13/6

Notary Public Signature:

My commission expires on: \_\_\_\_

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Filed with the Department of State on:

Tre Hargett Secretary of State

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