

Rulemaking Hearing Rules
Board of Respiratory Care
Chapter 1330-01
General Rules Governing Respiratory Care Practitioners
Amendment

Rule 1330-01-.06, Fees, is amended by deleting subparagraphs (1) (a), (1) (f), (3) (a) and (3) (d) in their entirety and substituting instead the following language, and is further amended by deleting subparagraph (3) (h) in its entirety, so that as amended, the new subparagraphs (1) (a), (1) (f), (3) (a) and (3) (d) shall read:

(1) (a) Total Application fee - A fee to be paid by all applicants seeking initial licensure, including those seeking licensure by reciprocity. This fee consists of the Application Fee and License Fee. In cases where an applicant is denied licensure or the application file is closed due to abandonment, only the portion representing the License Fee will be refundable.

(1) (f) State Regulatory fee - A non-refundable fee to be paid by all individuals with all applications.

(3) (a) Total Application Fee

1.	Application Fee	\$120.00
2.	License Fee	<u>80.00</u>
	Total Application Fee	\$200.00

(3) (d) Renewal (biennial) Fee 150.00

Authority: T.C.A. §§ 4-3-1011, 4-5-202, 4-5-204, and 63-27-104.

The rulemaking hearing rules set out herein were properly filed in the Department of State on the 18th day of July, 2007, and will become effective on the 1st day of October, 2007. (FS 07-10-07; DBID 2610)

Addendum
Economic Impact Statement

(1) Type or types of small business subject to the proposed rule that would bear the cost of, and/or directly benefit from the proposed rule:

- (a) Respiratory care practitioners who provide their services as independent contractors; and
- (b) Medical and other health-related practices that pay initial licensure and renewal fees for their employees who are licensed respiratory care practitioners.

(2) Identification and estimate of the number of small businesses subject to the proposed rule:

As of December 31, 2006, Tennessee had 4,190 licensed and certified respiratory care practitioners who were eligible for licensure or certification renewal.

- (3) Projected reporting, recordkeeping and other administrative costs required for compliance with the proposed rule, including the type of professional skills necessary for preparation of the report or record:

The proposed amendments which have economic impact on small businesses have no increased or new reporting, recordkeeping and other administrative costs that are required for compliance.

- (4) Statement of the probable effect on impacted small businesses and consumers:

The increase in fees will come directly out of the "bottom line" for the effected small businesses. Consumers are not impacted.

- (5) Description of any less burdensome, less intrusive or less costly alternative methods of achieving the purpose and/or objectives of the proposed rule that may exist, and to what extent, such alternative means might be less burdensome to small business:

It would be less burdensome to not have a fee increase, but that would be contrary to the Board's statutory requirements regarding fiscal solvency.

- (6) Comparison of the proposed rule with any federal or state counterparts:

The Board is not aware of any federal counterparts. However, the Board's proposed fees are presently very near the median fees for all of the state health-related licensing boards.

- (7) Analysis of the effect of the possible exemption of small businesses from all or any part of the requirements contained in the proposed rule.

It is not possible to exempt the impacted small businesses from all or any part of the requirements contained in the proposed rule because the impacted small businesses are the Board's licensees. If there were to be an exemption, the proposed rule amendment would have to actual effect. T.C.A. § 4-3-1011 states it is the legislature's intent that "fees and expenditures should be equal over a two-year period for each board."