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Sequence Number: 08-23-10
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File Date: 08/24/2010

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:	Tennessee Department of Human Services
Division:	Family Assistance
Contact Person:	Phyllis Simpson
Address:	Office of General Counsel Citizens Plaza Building, 15 th Floor 400 Deaderick Street Nashville, Tennessee 37243-1403
Phone:	615-313-4731
Email:	Phyllis.Simpson@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:	Jeffrey Blackshear
Address:	Office of General Counsel Citizens Plaza Building, 15 th Floor 400 Deaderick Street Nashville, Tennessee 37243-1403
Phone:	615-313-4731
Email:	Jeffrey.Blackshear@tn.gov

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

Address 1:	Citizens Plaza Building 2 nd Floor Conference Room 1 400 Deaderick Street		
Address 2:			
City:	Nashville		
Zip:	37243-1403		
Hearing Date :	10/26/10		
Hearing Time:	1:30 PM	<input checked="" type="checkbox"/> CST	<input type="checkbox"/> EST

Additional Hearing Information:

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Revision Type (check all that apply):

- Amendment
 New
 Repeal

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

Chapter Number	Chapter Title
1240-01-04	Financial Eligibility Requirements
Rule Number	Rule Title
1240-01-04-.27	Standards of Need/Income

Chapter Number	Chapter Title
Rule Number	Rule Title

Chapter 1240-01-04
Financial Eligibility Requirements

Amendments

Rule 1240-01-04-.27 Standards of Need/Income, is amended by deleting Table IV-A and Table IV-B under paragraph (1) subparagraph (d) in their entirety, and by inserting a new Table IV-A and Table IV-B, so that, as amended, subparagraph (d) Table IV-A and Table IV-B under paragraph (1) shall read as follows:

(d)

Table IV-A
Standard Deduction

Household Size	1	2	3	4	5	6+
Standard Deduction	\$142	\$142	\$142	\$153	\$179	\$205

Table IV-B
Food Stamp Deductions

Maximum Dependent Care	No Limit
Maximum Shelter Deduction for Non-Elderly/Disabled Households	\$458
Maximum Shelter Deduction for Elderly/Disabled Households	No Maximum

Authority: T.C.A. §§ 4-5-201 et seq.; T.C.A. § 4-5-202; T.C.A. §§ 71-1-105 and 71-5-304; 7 U.S.C.A. § 2014 and 2017(a); 7 C.F.R. §§ 273.9 and 273.10.

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: August 24, 2010

Signature: *Phyllis Simpson*

Name of Officer: Phyllis Simpson

Assistant General Counsel

Title of Officer: Tennessee Department of Human Services



Subscribed and sworn to before me on: August 24, 2010

Notary Public Signature: *Regina D. Mitchell*

My commission expires on: May 8, 2012

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Filed with the Department of State on: 8/24/10

Tre Hargett

Tre Hargett
Secretary of State

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