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Sequence Number: 02-07-14  
Notice ID(s): 2128  
File Date: 2/10/14

# Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, T.C.A. § 4-5-204. For questions and copies of the notice, contact the person listed below.

**Agency/Board/Commission:** Board of Communications Disorders and Sciences  
**Division:** Council for Hearing Instrument Specialists  
**Contact Person:** Alex Munderloh  
**Address:** 665 Mainstream Drive, Nashville, Tennessee 37243  
**Phone:** (615) 741-1611  
**Email:** Alex.Munderloh@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  
710 James Robertson Parkway,  
**Address:** Andrew Johnson Building, 5<sup>th</sup> Floor, Nashville, Tennessee 37243  
**Phone:** (615) 741-6350  
**Email:** Tina.M.Harris2@tn.gov

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

Address 1:	Metro Center
Address 2:	665 Mainstream Drive, Poplar Conference Room
City:	Nashville, Tennessee
Zip:	37228
Hearing Date:	06/26/14
Hearing Time:	9:00 a.m. <input checked="" type="checkbox"/> CST/CDT <input type="checkbox"/> EST/EDT

**Additional Hearing Information:**

**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
1370-02	General Rules Governing Hearing Instrument Specialists
Rule Number	Rule Title
1370-02-.06	Fees

(Place substance of rules and other info here. Statutory authority must be given for each rule change. For information on formatting rules go to <http://state.tn.us/sos/rules/1360/1360.htm>)

1370-02  
Amendments

Rule 1370-02-.06 Fees is amended by deleting subparts (3)(a)4(i) and (3)(a)4(ii) and renumbering the remaining subparts.

Authority: T.C.A. §§ 4-5-202, 4-5-204, 63-17-105, 63-17-201, 63-17-203, 63-17-210 and 63-17-215.

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.

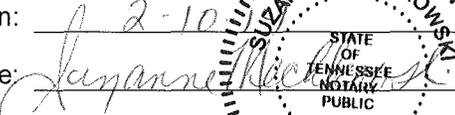
Date: 2/10/14

Signature: Alex Munderloh   
Assistant General Counsel

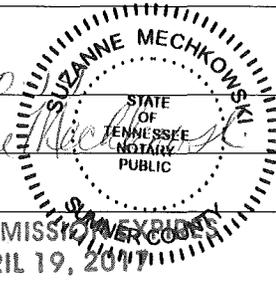
Name of Officer: Department of Health

Title of Officer: \_\_\_\_\_

Subscribed and sworn to before me on: 2-10-14

Notary Public Signature: Juanne Mechkowski 

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



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Filed with the Department of State on: 2/10/14

Tre Hargett

Tre Hargett  
Secretary of State

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