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Pursuant to its policy of nondiscrimination, the Department of State does not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, disability, or military service in its policies, or in the admission or access to, or treatment or employment in, its programs, services, or activities.

Equal Employment Opportunity/Affirmative Action inquiries or complaints should be directed to the Department of State, Bard G. Fisher, EEO/AA Coordinator, 7th Floor, Snodgrass Tower, 312 Eighth Avenue North, Nashville, TN, 37243-0311 or call (615) 741-7411, Tennessee Relay Center TDD 1-800-848-0298, Voice 1-800-848-0299. ADA inquiries or complaints should be directed to Mr. Fisher at the above mentioned location.

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A certified copy of each document filed with the Department of State, Division of Publications is available for public inspection from 8 A.M. to 4:30 P.M., Monday through Friday. Copies of documents may be made at a cost of 25 cents per page and $2 for the certification page, payable in advance if requested. The Division of Publications is located on the Eighth Floor, Snodgrass Tower, 312 Eighth Avenue North, Nashville, TN 37243 - 0310. Telephone inquiries may be made by calling (615) 741-0522, Tennessee Relay Center TDD 1-800-848-0298, Voice 1-800-848-0299. Individuals with disabilities who wish to inspect these filings should contact the Division of Publications to discuss any auxiliary aids or services needed to facilitate such inspection. Such contact may be made in person, by writing, telephonically or otherwise and should be made at least ten (10) days in advance of the date such party intends to make such inspection to allow time for the Division of Publications to provide such aid or service.

Department of State, Authorization No. 305084, 385 copies, January 2002. This public document was promulgated at a cost of $2.89 per copy.
The *Tennessee Administrative Register (T.A.R)* is an official publication of the Tennessee Department of State. The *T.A.R.* is compiled and published monthly by the Department of State pursuant to *Tennessee Code Annotated, Title 4, Chapter 5*. The T.A.R. contains in their entirety or in summary form the following: (1) various announcements (e.g., the maximum effective rate of interest on home loans as set by the Department of Commerce and Insurance, formula rate of interest and notices of review cycles); (2) emergency rules; (3) proposed rules; (4) public necessity rules; (5) notices of rulemaking hearings and (6) proclamations of the Wildlife Resources Commission.

**Emergency Rules** are rules promulgated due to an immediate danger to the public health, safety or welfare. These rules are effective immediately on the date of filing and remain in effect thereafter for up to 165 days. Unless the rule is promulgated in some permanent form, it will expire after the 165-day period. The text or a summary of the emergency rule will be published in the next issue of the T.A.R. after the rule is filed. Thereafter, a list of emergency rules currently in effect will be published.

**Proposed Rules** are those rules the agency is promulgating in permanent form in the absence of a rulemaking hearing. Unless a rulemaking hearing is requested within 30 days of the date the proposed rule is published in the *T.A.R.*, the rule will become effective 105 days after said publication date. All rules filed in one month will be published in the *T.A.R.* of the following month.

**Public Necessity Rules** are promulgated to delay the effective date of another rule that is not yet effective, to satisfy constitutional requirements or court orders, or to avoid loss of federal programs or funds. Upon filing, these rules are effective for a period of 165 days. The text or summary of the public necessity rule will be published in the next issue of the *T.A.R.* Thereafter, a list of public necessity rules currently in effect will be published.

Once a rule becomes effective, it is published in its entirety in the *official compilation-Rules and Regulations of the State of Tennessee*. Replacement pages for the compilation are published on a monthly basis as new rules or changes in existing rules become effective.

**Wildlife Proclamations** contain seasons, creel, size and bag limits, and areas open to hunting and/or fishing. They also establish wildlife and/or public hunting areas and declare the manner and means of taking. Since Wildlife Proclamations are published in their entirety in the *T.A.R.*, they are not published in the *official compilation-Rules and Regulations of the State of Tennessee*.

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**Copies of Rules from Back Issues** of the *Tennessee Administrative Register* may be ordered from the Division of Publications for 25 cents per page with $1.00 minimum. Back issues presently available start with the August, 1975 edition. The mailing address of the Division of Publications is shown on the order form in the back of each issue.

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# TABLE OF CONTENTS

## ANNOUNCEMENTS
- Financial Institutions, Department of
  - Announcement of Formula Rate of Interest ................................................................. 1
  - Announcement of Maximum Effective Rate of Interest ..................................................... 1
- Government Operations Committees
  - Announcement of Public Hearings .................................................................................. 1
- Health Facilities Commission
  - Notice of Beginning of Review Cycle ........................................................................... 4

## EMERGENCY RULES
- Emergency Rules Now in Effect ....................................................................................... 7

## PROPOSED RULES
- Tennessee Bureau of Investigation .................................................................................. 9
- Education, Board of ........................................................................................................... 19
- Labor and Workforce Development, Department of ........................................................ 23
- Student Assistance Corporation ......................................................................................... 26

## PUBLIC NECESSITY RULES
- Public Necessity Rules Now in Effect .............................................................................. 27
- Commerce and Insurance, Department of ....................................................................... 22

## RULEMAKING HEARINGS
- Commerce and Insurance, Department of ..................................................................... 33
- Health, Department of ...................................................................................................... 44
- Veterinary Medical Examiners, Board of ........................................................................ 63

## WILDLIFE PROCLAMATIONS
- 01-22 ................................................................................................................................. 67
- 01-24 ................................................................................................................................. 67

## CERTIFICATION
- ......................................................................................................................................... 73

## CHANGE OF ADDRESS FORM
- ......................................................................................................................................... 75

## ORDER FORM
- ......................................................................................................................................... 77
GOVERNMENT OPERATIONS COMMITTEES

ANNOUNCEMENT OF PUBLIC HEARINGS

For the date, time, and location of this hearing of the Joint Operations committees, call 615-741-3642. The following rules were filed in the Secretary of State’s office during the month of December 2001. All persons who wish to testify at the hearings or who wish to submit written statements on information for inclusion in the staff report on the rules should promptly notify Fred Standbrook, Suite G-3, War Memorial Building, Nashville, TN 37243-0059, (615) 741-3074.

DEPARTMENT OF FINANCIAL INSTITUTIONS - 0180

ANNOUNCEMENT OF FORMULAR RATE OF INTEREST

Pursuant to the provisions of Chapter 464, Public Acts of 1983, the Commissioner of Financial Institutions hereby announces that the formula rate of interest is 8.75 per cent.

This announcement is placed in the Tennessee Administrative Register for the purpose of information only and does not constitute a rule within the meaning of the Uniform Administrative Procedures Act.

DEPARTMENT OF FINANCIAL INSTITUTIONS - 0180

ANNOUNCEMENT OF MAXIMUM EFFECTIVE RATE OF INTEREST

The Federal National Mortgage Association has discontinued its free market auction system for commitments to purchase conventional home mortgages. Therefore, the Commissioner of Financial Institutions hereby announces that the maximum effective rate of interest per annum for home loans as set by the General Assembly in 1987, Public Chapter 291, for the month of February 2002 is 9.54 per cent per annum.

The rate as set by the said law is an amount equal to four percentage points above the index of market yields of long term government bonds adjusted to a thirty (30) year maturity by the U. S. Department of the Treasury. For the most recent weekly average statistical data available preceding the date of this announcement, the published rate is 5.54 per cent.

Persons affected by the maximum effective rate of interest for home loans as set forth in this notice should consult legal counsel as to the effect of the Depository Institutions Deregulation and Monetary Control Act of 1980 (P. L. 96-221 as amended by P. L. 96-399) and regulations pursuant to that Act promulgated by the Federal Home Loan Bank Board. State usury laws as they relate to certain loans made after March 31, 1980, may be preempted by this Act.

GOVERNMENT OPERATIONS COMMITTEES

ANNOUNCEMENT OF PUBLIC HEARINGS

For the date, time, and, location of this hearing of the Joint Operations committees, call 615-741-3642. The following rules were filed in the Secretary of State’s office during the month of December 2001. All persons who wish to testify at the hearings or who wish to submit written statements on information for inclusion in the staff report on the rules should promptly notify Fred Standbrook, Suite G-3, War Memorial Building, Nashville, TN 37243-0059, (615) 741-3074.
<table>
<thead>
<tr>
<th>SEQ</th>
<th>FILE DATE</th>
<th>DEPT. &amp; DIVISION</th>
<th>TYPE OF FILING</th>
<th>DESCRIPTION</th>
<th>RULE NUMBER AND RULE TITLE</th>
<th>LEGAL CONTACT</th>
<th>EFFECTIVE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-01</td>
<td>Dec 6, 2001</td>
<td>1255 Real Estate Appraiser Commission</td>
<td>Rulemaking</td>
<td>Amendments</td>
<td>Chapter 1255-6 Reciprocity; 1255-6-.02 Temporary Practice Permits</td>
<td>M. Connaught O'Connor BPR # 020511 Staff Attorney Snodgrass/TN Twr 25th Fl 312 8th Ave N Nashville, TN 37243 615-741-3072</td>
<td>Feb 19, 2002</td>
</tr>
<tr>
<td>12-02</td>
<td>Dec 10, 2001</td>
<td>1640 Tennessee Student Assistance Corporation</td>
<td>Proposed Rules</td>
<td>Amendments</td>
<td>Chapter 1640-1-16 Robert C. Byrd Honors Scholarship Program 1640-1-16-.03 Eligibility and Application Procedures</td>
<td>Ron Gambill Executive Director TN Student Assistance Corp. Suite 1950, Pkwy Twrs 404 James Robertson Pkwy Nashville, TN 37243-0820 (615) 741-1346</td>
<td>April 30, 2002</td>
</tr>
<tr>
<td>12-03</td>
<td>Dec 13, 2001</td>
<td>0800 Labor and Workforce Development Division of Boiler and Elevator Inspection Elevator Safety Board</td>
<td>Proposed Rules</td>
<td>Amendments</td>
<td>Chapter 0800-3-4 Elevators, Dumbwaiters, Escalators, and Other Lifts 0800-3-4-.01 Definitions 0800-3-4-.03 Design, Installation and Alterations Chapter 0880-3-10 Fees 0800-3-10-.01 Fees</td>
<td>Mark P. Reineke General Counsel Labor TN Twr, 26th Fl 312 8th Ave N Nashville, TN 37243-0662 (615) 741-0851</td>
<td>April 30, 2002</td>
</tr>
<tr>
<td>12-04</td>
<td>Dec 19, 2001</td>
<td>1395 Tennessee Bureau of Investigation</td>
<td>Proposed Rules</td>
<td>New Rule</td>
<td>Chapter 1395-1-5 Sexual Offender Registration and Monitoring Program 1395-1-5-.01 Purpose and Scope 1395-1-5-.02 Definitions 1395-1-5-.03 Sexual Offender Registration and Monitoring Program in General 1395-1-5-.04 Monitoring Form Requirements 1395-1-5-.05 Sexual Offender Registration and Monitoring Process 1395-1-5-.06 Record System 1395-1-5-.07 Removal from Registration and Monitoring Requirements 1395-1-5-.08 Violations- Penalties</td>
<td>David Jennings TBI 901 R.S. Gass Boulevard Nashville, TN 37216-2639 (615) 744-4204</td>
<td>April 30, 2002</td>
</tr>
<tr>
<td>SEQ</td>
<td>FILE DATE</td>
<td>DEPT. &amp; DIVISION</td>
<td>TYPE OF FILING</td>
<td>DESCRIPTI ON</td>
<td>RULE NUMBER AND RULE TITLE</td>
<td>LEGAL CONTACT</td>
<td>EFFECTIVE DATE</td>
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<td>---------------</td>
<td>----------------</td>
</tr>
</tbody>
</table>
| 12-05 | Dec 18, 2001 | 1240 Human Services Child Support Division | Rulemaking Hearing Rules | New Rules | **Chapter 1240-2-5**  
 Liens for Child Support  
 1240-2-5-.01 Purpose and Scope  
 1240-2-5-.02 Definitions  
 1240-2-5-.03 Liens for Child Support Arrearages  
 1240-2-5-.04 Liens of Other State Child Support Agencies  
 1240-2-5-.05 Lien Priorities  
 1240-2-5-.06 Enforcement of Liens by Administrative Seizure or Sale  
 1240-2-5-.07 Rebuttable Presumption Regarding Ownership  
 1240-2-5-.08 Exemptions From Sale Enumeration of Exemptions  
 1240-2-5-.09 Procedures for Sale of Property  
 1240-2-5-.10 Effect of Final Order Conveyance of Title Authority Over Seized or Sold Property  
 1240-2-5-.11 Release of Lien  
 1240-2-5-.12 Due Process Procedures for Administrative Seize or Sale of Assets  
 1240-2-5-.13 Non-Interference with Department's Actions  
 1240-2-5-.14 Liability for Fees and Costs  
 1240-2-5-.15 Child Support Lien Notice Form  
 1240-2-5-.16 and Instructions | Barbara Broersma  
 Assistant General Counsel  
 15th Fl Citizens Plaza Bldg  
 400 Deaderick St  
 Nashville, TN 37248-0006  
 (615) 313-4731 | March 3, 2002 |
| 12-24 | Dec 31, 2001 | 0520 Education | Proposed Rule Amendment | **Chapter 0520-1-3**  
 Minimum Requirements for the Approval of Public Schools  
 0520-1-3-.06 Graduation, Requirement E | Karen Weeks  
 State Board of Education  
 9th Fl, Andrew Johnson Twr  
 710 James Robertson Pkwy  
 Nashville, TN, 37243-1050  
 615-532-3528 | April 30, 2002 |
<table>
<thead>
<tr>
<th>SEQ</th>
<th>FILE DATE</th>
<th>DEPT. &amp; DIVISION</th>
<th>TYPE OF FILING</th>
<th>DESCRIPTION</th>
<th>RULE NUMBER AND RULE TITLE</th>
<th>LEGAL CONTACT</th>
<th>EFFECTIVE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>12-27</td>
<td>Dec 31, 2001</td>
<td>0780 Commerce and Insurance Division of Insurance and Division of TennCare Oversight</td>
<td>Public Necessity Rules New Rules</td>
<td>Chapter 0780-1-73 Uniform Claims Process for TennCare Participating Managed Care Organizations 0780-1-73-.01 Authority 0780-1-73-.02 Purpose and Scope 0780-1-73-.03 Definitions 0780-1-73-.04 Uniform Forms Required 0780-1-73-.05 Severability and Preemption</td>
<td>Julie W. Buhrman Staff Attorney Commerce and Insurance 25th Fl TN Twr 312 8th Ave. N Nashville, TN 37243 615-741-2199</td>
<td>Dec 31, 2001 through June 14, 2002</td>
<td></td>
</tr>
</tbody>
</table>
HEALTH FACILITIES COMMISSION - 0720

NOTICE OF BEGINNING OF REVIEW CYCLE

Applications will be heard at the February 27, 2002 Health Facilities Commission Meeting except as otherwise noted.

*Denotes applications being placed on the Consent Calendar.
+Denotes applications under simultaneous review.

This is to provide official notification that the Certificate of Need applications listed below have begun their official 90-day review cycle effective December 1, 2001. The review cycle includes a 60-day period of review by the Division of Assessment and Planning within the Tennessee Department of Health or the Department of Mental Health and Mental Retardation. During this 60-day period, the Department of Health may hold a public hearing, if requested, with respect to each application and will conclude the period with a written report. Pursuant to Public Chapter 120, Acts of 1993, certain unopposed applications may be placed on a “consent calendar.” Such applications are subject to a 60-day review cycle, including a 30-day period of review by the Department of Health, Division of Assessment and Planning or the Department of Mental Health and Mental Retardation. Applications intended to be considered on the consent calendar, if any, are denoted by an asterisk.

Pursuant to T.C.A., Section 68-11-108(h)(1) effective April 5, 2000, any health care institution wishing to oppose a Certificate of Need must file a written objection with the Tennessee Health Facilities Commission and serve a copy on the contact person no later than fifteen (15) days before the regularly scheduled Tennessee Health Facilities Commission meeting at which the application will be heard.

For more information concerning each application or its review cycle, you may contact the Tennessee Department of Health/Division of Assessment & Planning (615/741-0244), their designee, or the Health Facilities Commission (615/741-2364).

NAME AND ADDRESS

Premier Support Services, Inc.
An affiliate of Interim Healthcare
1835 North Cumberland Street
Morristown (Hamblen Co.), TN 37814-7511
Peggy Helton – (865)—932-0640
CN0110-080

Methodist Healthcare – Memphis Hospitals
135 Pauline Street
North Memphis (Shelby Co.), TN 38105
Jane Lucchesi – (901)—726-2981
CN0111-089

DESCRIPTION

The relocation of the parent office of Premier Support Services, Inc. from 8712 Asheville Highway, Knoxville, Tennessee to 1835 North Cumberland Street, Morristown, Tennessee.
$  6,550.00

The relocation of the existing fifty-eight (58) bed adult psychiatric unit currently located at Methodist Healthcare – Central Hospital, 1265 Union Avenue to 135 Pauline Street North, Memphis, Tennessee.
$  377,149.00
NAME AND ADDRESS

Takoma Adventist Hospital
401 Takoma Avenue
Greeneville (Greene Co.), TN  37743
John Wellborn – (615)—665-2022
CN0111-090

DESCRIPTION

The initiation of rehabilitation services and the establishment of an eleven (11) bed rehab unit at Takoma Adventist Hospital located at 401 Takoma Avenue in Greeneville, Tennessee. The 11-bed unit will be located in space currently occupied by thirteen (13) skilled nursing facility beds in the twenty-one (21) bed skilled nursing facility. This project will reduce the licensed bed capacity of the skilled nursing facility from a 21-bed unit to an 8-bed unit. The 11-bed unit will be created by converting five (5) existing acute medical-surgical beds to rehab beds and by creating six (6) new hospital beds. If approved, the hospital’s bed capacity will increase from ninety-four (94) beds to one hundred (100) beds while the skilled nursing facility bed complement will decrease by thirteen (13) to eight (8) beds.

$ 105,000.00
EMERGENCY RULES

EMERGENCY RULES NOW IN EFFECT

1340 - Department of Safety - Division of Driver License Issuance - Emergency rules regarding verification of residence and identification for those seeking driver licenses upon initial issuance, chapter 1340-1-13 Classified and Commercial Driver Licenses, 11 T.A.R. (November 15, 2001) - Effective October 31, 2001 through April 14, 2002. (10-22)

PROPOSED RULES

TENNESSEE BUREAU OF INVESTIGATION - 1395

CHAPTER 1395-1-5
SEXUAL OFFENDER REGISTRATION AND MONITORING PROGRAM

Presented herein are proposed rules of the Tennessee Bureau of Investigation submitted pursuant to T.C.A. §4-5-202 in lieu of a rulemaking hearing. It is the intent of the Professional Standards Unit of the Tennessee Bureau of Investigation to promulgate these rules without a rulemaking hearing, unless a petition requesting such hearing is filed within thirty (30) days of the publication date of the issue of the Tennessee Administrative Register in which the proposed amendments are published. Such petition to be effective must be filed with the Tennessee Bureau of Investigation Professional Standards Unit, 901 R.S. Gass Boulevard, Nashville, Tennessee 37216-2639, and the Department of State, Division of Publications, Suite 1700 James K. Polk Building, Nashville, Tennessee 37243-0310. The petition must be signed by twenty-five (25) persons who will be affected by the amendments, or submitted by a municipality which will be affected by the amendments, or an association of twenty-five (25) or more members, or any standing committee of the General Assembly.

For complete copies of the entire text of the proposed rules, please contact David Jennings, Executive Assistant, Professional Standards Unit, Tennessee Bureau of Investigation, 901 R.S. Gass Boulevard, Nashville, Tennessee 37216-2639, and telephone (615) 744-4204.

The text of the proposed rules is as follows:

Larry Wallace, Director
Tennessee Bureau of Investigation

RULES OF THE
TENNESSEE BUREAU OF INVESTIGATION

CHAPTER 1395-1-5
SEXUAL OFFENDER REGISTRATION AND MONITORING PROGRAM

TABLE OF CONTENTS

| 1395-1-.01 | Purpose and Scope                                     | 1395-1-.04 | Monitoring Form Requirements |
| 1395-1-.02 | Definitions                                          | 1395-1-.05 | Sexual Offender Registration and Monitoring Process |
| 1395-1-.03 | Sexual Offender Registration and Monitoring Program in General |
| 1395-1-.06 | Record System                                        | 1395-1-.07 | Removal from Registration and Monitoring Requirements |
| 1395-1-.08 | Violations- Penalties                                |
1395-1-.01 PURPOSE AND SCOPE.

The purpose of the program has been found to be regulatory, not punitive. It has been held that the program addresses legitimate concerns of law enforcement about sex offenders. Cutshall v. Sundquist, 193 F.3d 466 (6th Cir. 1999). As an independent department, TBI has been charged with the responsibility of administering and maintaining the program, which is civil and remedial in nature.

Only those offenders who meet the statutory definition of “sexual offender” can be registered, regardless of court orders to the contrary.

Information contained in the registry should not be used to injure, harass, or commit a criminal act against any person named in the registry; any such action could result in criminal prosecution.


1395-1-.02 DEFINITIONS.

(1) Acknowledgment Form-A form provided by the TBI to agencies for the purpose of confirming that the sexual offender understands the requirements and penalties involved in the sexual offender registration/monitoring process.

(2) Business Day - A twenty-four (24) hour period beginning at 12:01 a.m.

(3) Centralized Record System - Collection of criminal history maintained by the TBI CIU that contains sexual offender registration and verification information.

(4) CIU - Criminal Intelligence Unit.

(5) Current Photograph - Most current photograph available.

(6) Deliver-By United States mail service or other courier service (UPS, Federal Express, etc.) or hand delivery to the TBI Headquarters in Nashville, Tennessee.

(7) Expungement- The deletion of information from the sexual offender registry upon court order, death of the sexual offender or the act of moving out of the state of Tennessee.

(8) FBI-Federal Bureau of Investigation.

(9) Local Law Enforcement Agency - Police Department or Sheriff’s Department/Office

(10) Notice of Death - Consists of a copy of the certificate of death issued by the State or County Department of Health or a listing in the Social Security Death Index or a listing in the State Department of Health Vital Statistics Index. Obituaries and other death notices from newspapers and other publications are not sufficient absent verification by one of the other means listed above.

(11) Registration/ Monitoring Form - Form provided to sexual offenders to record sexual offender registration and to verify that information is current and correct.

(12) Sexual Offender-A person who is, or has been, convicted in Tennessee of committing a sexual offense or who is, or has been, convicted in another state or another country, or who is or has been convicted in a federal or military
court, of committing an act which would have constituted a sexual offense if it had been committed in this state; provided that:

(a) Conviction or any other alternative to incarceration occurs on or after January 1, 1995; or

(b) If conviction occurred prior to January 1, 1995, the person does one of the following:
   1. Remains under or is placed on probation, parole, or any other alternative to incarceration on or after January 1, 1995;
   2. Is discharged from probation, parole, or any other alternative to incarceration on or after January 1, 1995;
   3. Is discharged from incarceration without supervision on or after January 1, 1995.

(13) Sexual Offender Registry—Collection of information regarding sexual offenders maintained by the TBI CIU.

(14) Sexual Offense—The commission of any act that constitutes the criminal offense of:

(a) Aggravated rape, under § 39-13-502;

(b) Rape, under § 39-13-503;

(c) Aggravated sexual battery, under § 39-13-504;

(d) Sexual battery, under § 39-13-505;

(e) Statutory rape, under § 39-13-506;

(f) Aggravated prostitution, under § 39-13-516;

(g) Sexual exploitation of a minor, under § 39-17-1003;

(h) Aggravated sexual exploitation of a minor, under § 39-17-1005;

(i) Incest, under § 39-15-302;

(j) False imprisonment of a minor, under § 39-13-302;

(k) Kidnapping of a minor, under § 39-13-303;

(l) Aggravated kidnapping of a minor, under § 39-13-304;

(m) Especially aggravated kidnapping of a minor, under § 39-13-305;

(n) Rape of a child, under § 39-13-522;

(o) Sexual battery by an authority figure, under § 39-13-527;

(p) Attempt, under § 39-12-101, solicitation, under § 39-12-102, or conspiracy, under § 39-12-103, to commit any of the offenses enumerated above;
(q) Criminal responsibility, under § 39-11-402(2), for facilitating the commission under § 39-11-403 of, or being an accessory after the fact, under § 39-11-411, to any of the offenses enumerated above; or

(r) Any act enumerated above committed prior to November 1, 1989, which may have been listed in a section of the Tennessee Code Annotated that has been repealed.

(15) “Sexually violent offense” means the commission of any act that constitutes the criminal offense of:

(a) Aggravated rape, under § 39-13-502;

(b) Rape, under § 39-13-503(1) or § 39-13-503(3);

(c) Aggravated sexual battery, under § 39-13-504;

(d) Rape of a child, under § 39-13-522; or

(e) Criminal attempt to commit any of the offenses listed above.

(16) Signature- A valid signature of the sexual offender. If someone besides the sexual offender signs a form, then a valid court order or notarized document authorizing the person signing the form to do so, must be presented to the TBI authorizing such individual’s signature for the sexual offender.

(17) TBI-Tennessee Bureau of Investigation.

(18) TOMIS - Tennessee Offender Management Information System


1395-1-5-. 03 SEXUAL OFFENDER REGISTRATION AND MONITORING PROGRAM IN GENERAL.

(1) As an independent state agency, TBI has been statutorily charged with the responsibility of administering and maintaining the program, which is civil and remedial in nature. Only those offenders who meet the statutory definition of “sexual offender” can be registered, regardless of court orders to the contrary.

Information contained in the registry should not be used to injure, harass, or commit a criminal act against any person named in the registry; any such action could result in criminal prosecution.

(2) All sexual offenders shall:

(a) Complete a TBI sexual offender registration/monitoring form within ten (10) days following release on probation, parole, any other alternative to incarceration; within ten (10) days following discharge from incarceration without supervision; within ten (10) days following any change of residence; and within ten (10) days after coming into a municipality or county where the offender temporarily resides, is domiciled, is employed, carries on a vocation, or is a student for any length of time; and

(b) Deliver the form to the TBI CIU at headquarters in Nashville.

(c) A registration/monitoring form is not considered complete unless it has been signed by the offender. If another person has been given power of attorney to sign documents for the offender and a copy of the
power of attorney has been provided to the TBI CIU that other person may sign the registration/monitoring form instead of the offender.

(d) Copies of registration/monitoring forms will not be accepted. The offender must return the original form that he/she receives from the TBI CIU to the TBI CIU.

(3) A person placed on probation or parole in another state for a crime that qualifies as a sexual offense in Tennessee, who is residing in Tennessee pursuant to a compact for out-of-state supervision, shall be subject to the same registration and monitoring requirements as a person placed on probation or parole for a sexual offense in Tennessee. Likewise, a person who is discharged from incarceration in another state without supervision for a crime that qualifies as a sexual offense in Tennessee shall be subject to the same registration and monitoring requirements as a person who is discharged from incarceration in Tennessee without supervision.

(4) It is the responsibility of the sexual offender to register with the program within ten days of his or her release into the community after conviction and to return the quarterly monitoring reports to the TBI CIU within ten days of receipt. It is also the responsibility of the sexual offender to give written notice to the TBI CIU of any change in address or employment within ten days of such change.


1395-1-5-. 04 MONITORING FORM REQUIREMENTS.

(1) TBI shall provide the sexual offender registration/monitoring and acknowledgment forms to local law enforcement agencies, the Tennessee Department of Correction, the Tennessee Department of Safety, parole officers, probation officers, TBI offices, and other officers and employees assigned responsibility for the supervised release of convicted felons into the community.

(2) The TBI sexual offender registration/monitoring form shall require at least the following information:

(a) Complete name as well as any alias or aliases;

(b) Date and place of birth;

(c) Social security number or numbers;

(d) State of issuance and identification number of any valid driver license or licenses;

(e) For a sexual offender on supervised release, the name address and telephone number of the registrant’s parole officer, probation officer, or other person responsible for the registrant’s supervision;

(f) Sexual offense or offenses of which the registrant has been convicted;

(g) Current place and length of employment;

(h) Current address and length of residence at such address;

(i) Race and gender;

(j) A current photograph;
(k) Signature of offender; and

(l) Such other information the TBI CIU deems necessary.

(3) At least once every ninety (90) days following receipt of the aforementioned registration/monitoring form, the TBI CIU shall by certified mail return receipt requested, send a nonforwardable, verification/monitoring form to the registrant’s last reported address that shall require the offender to complete the following requirements:

(a) Verify the continued accuracy of the information on the most recent registration/monitoring form;

(b) Complete the form; and

(c) Deliver the original form to the TBI CIU at headquarters in Nashville, within ten (10) business days following receipt. Copies or faxes will not be accepted.

(4) The monitoring requirements may be tolled only under the following circumstances:

(a) while an offender is incarcerated for another offense or as the result of having violated the terms of probation, parole or conditional discharge;

(b) while an offender is deported from this country.

(5) If the address provided by the offender is incorrect the TBI CIU shall list the address as “unknown.” An address is considered to be incorrect if two or more registration/monitoring forms are returned to the TBI CIU by the post office as undeliverable to the offender for any reason (e.g., “unclaimed,” “attempted-not known,” “moved,” “insufficient address,” etc.).


1395-1-5-.05 SEXUAL OFFENDER AND REGISTRATION MONITORING PROCESS.

(1) The officer or employee responsible for supervising a sexual offender who is, or has been, released on probation, parole, or any other alternative to incarceration shall:

(a) Obtain the offender’s signed statement acknowledging that the named officer or employee has obtained the offender’s anticipated residential address and completed the following tasks:

1. Explained the registration and verification requirements and sanctions of the program, and the offender understands; and

2. Provided the offender with a blank TBI sexual offender registration/monitoring form and assisted the offender in completion of the form.

(b) Obtain a current photograph of the offender; and

(c) Deliver the sexual offender registration forms, acknowledgment statements and photographs to the TBI CIU at headquarters in Nashville within three (3) business days following receipt.

(2) The warden of the correctional facility or sheriff of the jail from which a sexual offender is released from incarceration, with or without supervision, within at least ninety (90) days prior to the release of the offender shall:
(a) Obtain the offender’s signed statement acknowledging that the named warden or sheriff, or an agent of the warden or sheriff, has fully explained, and the offender understands, the registration and verification requirements and sanctions of the monitoring process;

(b) Include the offender’s anticipated residential address on the acknowledgment form; and

(c) Deliver the completed acknowledgment form and photograph to the TBI CIU at headquarters in Nashville within three (3) business days prior to the release of the offender.

(3) If an offender is placed on unsupervised probation, the court shall:

(a) Obtain the offender’s signed statement acknowledging that the court has fully explained, and the offender understands, the registration and verification requirements and sanctions of the monitoring process;

(b) Include the offender’s anticipated residential address on the acknowledgment form;

(c) Provide the offender with a blank TBI sexual offender registration/monitoring form and assist the offender in the completion of the form;

(d) Obtain a current photograph of the offender; and

(e) Send the signed and completed acknowledgment form, the sexual offender registration form and the photograph of the offender to the TBI CIU at headquarters in Nashville within three (3) business days following receipt.

(4) Sexual offender registration/monitoring forms and verification/monitoring forms shall be designed, printed and distributed by and at the expense of TBI. Sexual offender registration/monitoring forms shall be available from local law enforcement agencies, the TBI, the Tennessee department of correction, the Tennessee department of safety, and parole officers, probation officers, and other public officers and employees assigned responsibility for the supervised release of convicted felons into the community. The TBI recommends that local law enforcement agencies adopt policies regarding the location of such forms within the agencies in order to ensure their availability.

(a) Copies of the Sexual Offender Release Notification forms (BI-0126) and Sexual Offender Registration forms (BI-0125) may be obtained from the TBI Sex Offender Registry program in the following ways:

1. By contacting:
   Tennessee Internet Criminal Information Center Hotline
   1-888-837-4170

2. By faxing a request to:
   TBI Sex Offender Registry
   (615)532-8315

3. By sending a written request to:
   TBI Sex Offender Registry
   901 R.S. Gass Boulevard
   Nashville, Tennessee 37216-2639

(a) All questions concerning the Sex Offender Registry Program should be addressed to the following location:
1395-1-5-.06 RECORD SYSTEM.

(1) The TBI shall establish, maintain and update a file for each registered offender. Said file will contain the offender’s registration and monitoring forms, criminal history, and any other documents relevant to the offender’s placement on the Sexual Offender Registry (e.g., copies of judgments, probation orders, correspondence with other states concerning offenders moving to or from Tennessee, TOMIS printouts, etc.).

(2) The TBI shall establish, maintain and update a centralized record system of sexual offender registration and verification information and promptly report such information to the following entities:

(a) The local law enforcement agency for the offender’s place of residence;

(b) The local law enforcement agency for the offender’s previous place of residence if a change of residence is indicated;

(c) The local law enforcement agency for the offender’s place of employment;

(d) The local law enforcement agency for the offender’s previous place of employment if a change of employment is indicated;

(e) When applicable, the probation officer, parole officer, or other public officer or employee assigned responsibility for the offender’s supervised release;

(f) The District Attorney General’s Office; and

(g) The identification division of the FBI.

(3) If an offender does not comply with the registration/monitoring process requirements, the TBI shall notify the district attorney general and the probation officer, parole officer or other public office or employee assigned responsibility for the sexual offender’s supervised release.

(4) For offenses committed prior to July 1, 1997, information reported on sexual offender registration/monitoring forms, verification/monitoring forms, and acknowledgment forms shall be confidential unless the local law enforcement agency determines that release of relevant information is necessary to protect the public. The TBI recommends that local law enforcement agencies should adopt policies regarding the release of confidential information about registered sexual offenders to the public. Such policies should address issues such as:

(a) What form(s) of identification will be required of the requestor;

(b) What scenarios demonstrate a need to protect the public;
(c) In what form the information will be released; and

(d) What instructions will be given to the requestor about his or her dissemination of the information to others.

(5) TBI officers and employees shall be immune from liability relative to their good faith actions, omissions and conduct regarding the sexual offender registration/monitoring process.

(6) The following information is public information relating to sexual offenses committed on or after July 1, 1997, and shall be available to the public through the TBI’s web site and through the Tennessee Internet Criminal Information Center Hotline, a toll-free telephone number:

(a) The offender’s complete name as well as any aliases;

(b) The offender’s date of birth;

(c) The sexual offense or offenses of which the offender has been convicted;

(d) The street address including the house number, county, city and ZIP code area in which the offender resides, or if the offender does not reside in a city, the county, rural route and ZIP Code area where the offender resides;

(e) The offender’s race and gender;

(f) The date of the last verification of information by the offender;

(g) The most recent photograph of the offender that has been submitted to the TBI sexual offender registry;

(h) The offender’s driver’s license number and issuing state; and

(i) The offender’s parole/probation office.


1395-1-5-. 07 REMOVAL FROM REGISTRATION AND MONITORING REQUIREMENTS.

(1) Certain offenders must remain on the registry for life; they can only be removed if they move out of state and no longer work or attend school in Tennessee. These offenders fall into two categories:

(a) Those who are convicted of a “sexually violent offense”; and

(b) Those with one or more convictions for a sexual offense prior to the date of the offense(s) for which they are currently required to register.

(2) A registered sexual offender may file a petition in the circuit court of the county in which the person resides for an order relieving the person of the continuing duty to submit the required forms for the sexual offender registration and monitoring process only according to the following conditions:

(a) No sooner than ten (10) years after termination of active supervision on probation, parole, or any other alternative to incarceration; or
(b) No sooner than ten (10) years after discharge from incarceration without supervision.

(3) If the court enters such an order it is the responsibility of the sexual offender to provide a certified copy of the order to the TBI.

(4) An individual may not file more than one (1) petition for removal from the sexual register during any five-year period.

(5) Upon receipt and verification of notice of the death of a registered offender, the TBI CIU shall expunge all data pertaining to a sexual offender from the centralized record system.


1395-1-5-. 08 VIOLATIONS- PENALTIES.

(1) An individual who knowingly falsifies a sexual offender registration/ monitoring form or verification/ monitoring form shall be guilty of a Class A misdemeanor for the first offense, which is punishable by confinement in the county jail for not less than one hundred eighty (180) days.

(2) Any subsequent violation shall constitute a Class E felony.

(3) If the offender is on probation, parole, or any other alternative to incarceration, then such falsification shall also constitute grounds for revocation of probation, parole, or other alternative to incarceration.

(4) An offender who knowingly fails to timely disclose required information including signature or photographs or to timely deliver required registration/ monitoring or verification/ monitoring forms to the TBI CIU shall be deemed to have committed a falsification to the same extent as actually providing false information.

(5) In a prosecution for violation of the registration and/or monitoring requirements, in lieu of live testimony the TBI CIU records custodian may issue a sworn affidavit regarding the registry records of registered sexual offenders.


1395-1-5-. 09 SUBPOENAS – FEES.

(1) When an employee of the TBI CIU receives a subpoena to testify in a civil lawsuit relating to information contained in the file of a registered sexual offender the employee shall be considered on State business, and the State shall be compensated for his/her time away from his/her primary duties.

(2) Fees for compiling documents and materials, copying charges, and fees for expert and other testimony shall be charged at the level set in TBI Policy 7-2-004 (Fees for Production of Documents and Testimony).

(3) Expenses are to be calculated in accordance with Rule 1395-1-6-.06 of the Tennessee Bureau of Investigation.

Authority: T.C.A. § 4-4-103; 38-6-101.

The proposed rules set out herein were properly filed in the Department of State on the 19th day of December, 2001, and pursuant to the instructions set out above, and in the absence of the filing of an appropriate petition calling for a rulemaking hearing, will become effective on the 30th day of April, 2002. (12-04)
Presented herein is the proposed amendment of the State Board of Education submitted pursuant to T. C. A. § 4-5-202 in lieu of a rulemaking hearing. It is the intent of the State Board of Education to promulgate this amendment without a rulemaking hearing unless a petition requesting such hearing is filed within thirty (30) days of the publication date of the issue of the Tennessee Administrative Register in which the proposed rules are published. Such petition to be effective must be filed with the State Board of Education, 9th Floor, Andrew Johnson Tower, 710 James Robertson Parkway, Nashville, Tennessee 37243-1050, and in the Department of State, 8th Floor – William Snodgrass Building, 312 8th Avenue North, Nashville, Tennessee 37243, and must be signed by twenty-five (25) persons who will be affected by the rule, or by a municipality which will be affected by the rule, or an association of twenty-five (25) or more members, or any standing committee of the General Assembly.

For a copy of this proposed rule, contact Karen Weeks, State Board of Education, 9th Floor, Andrew Johnson Tower, 710 James Robertson Parkway, Nashville, TN, 37243-1050, (615) 532-3528.

The text of the proposed rule is as follows:

**AMENDMENT**

Part 4 of subparagraph (e) of paragraph (1) of Rule 0520-1-3-.06 Graduation, Requirement E is amended by deleting the part in its entirety and substituting the following language so that as amended the part shall read:

4. Visual and Performing Arts
   
   (i) General Music
   
   (ii) Instrumental Music I, II, III, IV
   
   (iii) Vocal/Choral Music I, II, III, IV
   
   (iv) Class Piano I, II, III, IV
   
   (v) Music History
   
   (vi) Music Theory
   
   (vii) Visual Art I, II, III, IV
   
   (viii) Visual Art History
   
   (ix) Dance I, II, III, IV
   
   (x) Theater I, II, III, IV
   
   (xi) Advanced Placement Music Theory
Part 10 of subparagraph (e) of paragraph (1) of Rule 0520-1-3-.06 Graduation, Requirement E is amended by deleting the part in its entirety and substituting the following language so that as amended the part shall read:

10. Science

   (i) Life Science
   (ii) Physical Science
   (iii) Biology I, II
   (iv) Anatomy and Physiology
   (v) Chemistry I, II
   (vi) Earth Science
   (vii) Geology
   (viii) Environmental Science
   (ix) Ecology
   (x) Physics
   (xi) Scientific Research
   (xii) Advanced Placement Biology
   (xiii) Advanced Placement Chemistry
   (xiv) Advanced Placement Physics B, C
   (xv) Advanced Placement Environmental Science

Part 11 of subparagraph (e) of paragraph (1) of Rule 0520-1-3-.06 Graduation, Requirement E is amended by deleting the part in its entirety and substituting the following language so that as amended the part shall read:

11. Social Studies

   (i) United States History
   (ii) Economics*
   (iii) United States Government**
   (iv) Sociology
(v) Psychology
(vi) World Geography
(vii) World History
(viii) Contemporary Issues
(ix) African-American History
(x) Advanced Placement United States History
(xi) Advanced Placement European History
(xii) Advanced Placement World History
(xiii) Advanced Placement Economics
(xiv) Advanced Placement Government and Politics
(xv) Advanced Placement Human Geography

* The economics requirement for graduation may be satisfied by business economics, international business/marketing, one-half credit in marketing education, or out-of-school experiences through Junior Achievement.

** The United States government requirement for graduation may be satisfied by one semester of American business/legal systems or by three years of JROTC.

Authority: T.C.A. §49-1-302.

The proposed rules set out herein were properly filed in the Department of State on the 31st day of December, 2002, pursuant to the instructions set out above, and in the absence of the filing of an appropriate petition calling for a rulemaking hearing, will become effective on the 30th day of April, 2002. (12-24)
Presented herein is the proposed amendment of the State Board of Education submitted pursuant to T. C. A. § 4-5-202 in lieu of a rulemaking hearing. It is the intent of the State Board of Education to promulgate this amendment without a rulemaking hearing unless a petition requesting such hearing is filed within thirty (30) days of the publication date of the issue of the Tennessee Administrative Register in which the proposed rules are published. Such petition to be effective must be filed with the State Board of Education, 9th Floor, Andrew Johnson Tower, 710 James Robertson Parkway, Nashville, Tennessee 37243-1050, and in the Department of State, 8th Floor – William Snodgrass Building, 312 8th Avenue North, Nashville, Tennessee 37243, and must be signed by twenty-five (25) persons who will be affected by the rule, or by a municipality which will be affected by the rule, or an association of twenty-five (25) or more members, or any standing committee of the General Assembly.

For a copy of this proposed rule, contact Karen Weeks, State Board of Education, 9th Floor, Andrew Johnson Tower, 710 James Robertson Parkway, Nashville, TN, 37243-1050, (615) 532-3528.

The text of the proposed rule is as follows:

**AMENDMENT**

Paragraph (1) of Rule 0520-2-4-.12 Requirements for the Professional School Service Personnel License is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the paragraph shall read:

1. School Food Service Supervisor Endorsement
   
   (a) The applicant shall hold a bachelor’s degree and the applicant shall be a licensed educator or shall have completed at least 18 semester hours in education, psychology, or sociology.

   (b) The applicant shall complete 12 semester hours including course work in each of the following:

   1. Personnel management,
   2. Nutrition,
   3. Accounting, cost analysis, or financial management of food systems, and
   4. Spreadsheet applications.

   (c) The applicant shall complete one of the following:

   1. A field experience of 6 semester hours, or
   2. A professional experience—supervised by a licensed school food service supervisor—of at least 120 clock hours including the following areas: procurement, quantity foods, design and layout, and sanitation and food safety.

Authority: T.C.A. §49-1-302.
The proposed rules set out herein were properly filed in the Department of State on the 31st day of December, 2002, pursuant to the instructions set out above, and in the absence of the filing of an appropriate petition calling for a rulemaking hearing, will become effective on the 30th day of April, 2002. (12-25)

DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT - 0800
DIVISION OF BOILER AND ELEVATOR INSPECTION
ELEVATOR SAFETY BOARD

Presented herein are proposed rules and amendments of the Department of Labor and Workforce Development, Division of Boiler and Elevator Inspection, Elevator Safety Board, submitted pursuant to T.C.A. § 4-5-202 in lieu of a rulemaking hearing. It is the intent of the Department of Labor to promulgate these rules and amendments without a rulemaking hearing unless a petition requesting such hearing is filed within thirty (30) days of the publication date of the issue of the Tennessee Administrative Register in which the proposed rules and amendments are published. Such petition to be effective must be filed in the Legal Section office of the Department of Labor, Tennessee Tower - 26th Floor, 312 Eighth Avenue North, Nashville, Tennessee 37243-0293, and in the Administrative Procedures Division of the Department of State, James K. Polk State Office Building, Suite 1700, 505 Deaderick Street, Nashville, Tennessee 37219-0310, and must be signed by twenty-five (25) persons who will be affected by the rule, or submitted by a municipality which will be affected by the rule, or an association of twenty-five (25) or more members, or any standing committee of the General Assembly.

For a copy of this proposed rule, contact Mr. Duane Davis, Chief Elevator Inspector, Tennessee Department of Labor and Workforce Development, Andrew Johnson Tower - 3rd Floor, 710 James Robertson Parkway, Nashville, Tennessee 37243-0663, telephone: (615) 741-2123.

The text of the proposed rules, amendments and repeals is as follows:

CHAPTER 0800-3-4
ELEVATORS, DUMBWAITERS, ESCALATORS, AND OTHER LIFTS

AMENDMENTS

Paragraph (6) of Rule 0800-3-4-.01 Definitions is amended by adding the words “, and Section 1.4 of the Safety Code for Existing Elevators and Escalators.” at the end of the paragraph, so that as amended the rule shall read:

(6) Other Terms. All other terms used in this Chapter shall have the meaning as defined by Section 3 of the Elevator Safety Code, and Section 1.4 of the Safety Code for Existing Elevators and Escalators.


Rule 0800-3-4-.01 Definitions is amended by adding a new paragraph (8), which shall read as follows:

ASME A17.3(a) - 2000, approved by the American Society of Mechanical Engineers on February 29, 2000, effective March 30, 2000, and it shall be considered a portion of this Chapter where rule numbers are used in this Chapter regarding existing elevators, dumbwaiters, escalator, and other lifts, they refer to the rules of the Safety Code for Existing Elevators and Escalators.


Paragraph (2) of Rule 0800-3-4-.03  Design, Installation and Alterations is amended by deleting the current language in its entirety and submitting the following language so that as amended the rule shall read:

(2) Existing Installations.

(a) Existing elevators, dumbwaiters, escalators, and other lifts, at a minimum shall meet the requirements of the Safety Code for Existing Elevators and Escalators. If an existing installation does not meet the requirements of the Safety Code for Existing Elevators and Escalators, it shall be upgraded. If an existing installation was required to meet more stringent requirements, it shall continue to meet those requirements. Every installation shall be maintained in a safe operating condition and shall be subject to inspections and tests specified in this Chapter.

(b) All modifications as required to comply with paragraph (a) of this subsection shall be initiated as soon as possible, and shall be completed no later than five (5) years from the effective date of this rule.


Subparagraph (a) of Paragraph (3) of Rule 0800-3-4-.03  Design, Installation and Alterations is amended by deleting the current language in its entirety and submitting the following language so that as amended the rule shall read:

(3) Alteration of Existing Installations.

(a) Any alteration made to existing installations shall meet the requirements as set out in the Safety Code for Existing Elevators and Escalators, or must be altered in accordance with exceptions granted by the Board. All requests for exceptions shall be submitted to the Board in writing no later than 30 days prior to the next regularly scheduled or called meeting of the Board. All duly filed requests for exceptions shall be considered by the Board at the next regularly scheduled or called meeting of the Board. All modifications as required to comply with this paragraph (a) of this subsection shall be subject to the initiation period stated in subsection (2)(b) of this Rule.


CHAPTER 0880-3-10
FEES
AMENDMENTS

Paragraph (1) of Rule 0880-3-10-.01 is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the paragraph shall read:
(1) For construction permits for new or altered elevators, escalators, aerial passenger tramways, lifts, surface lifts, tows
and dumbwaiters required by T.C.A. Section 68-121-108(c).............................................................$150.00

**Authority:** T.C.A. §§4-5-202(a)(3), and 68-121-103(a)(4).

Paragraph (2) of Rule 0800-3-10-.01 is amended by deleting the paragraph in its entirety and substituting the following lan-
guage so that as amended the paragraph shall read:

(2) For acceptance inspections for new or altered elevators, escalators, aerial passenger tramways, lifts, surface lifts, tows
and dumbwaiters required by T.C.A. Section 68-121-108(c).............................................................$150.00

**Authority:** T.C.A. §§4-5-202(a)(3), and 68-121-103(a)(4).

Paragraph (3) of Rule 0800-3-10-.01 is amended by deleting the paragraph in its entirety and substituting the following lan-
guage so that as amended the paragraph shall read:

(3) For operating permits for new or existing elevators, escalators, aerial passenger tramways, lifts, surface lifts, tows
and dumbwaiters required by T.C.A. Section 68-121-107(b) .................................................................$50.00

**Authority:** T.C.A. §§4-5-202(a)(3), and 68-121-103(a)(4).

The proposed rules set out herein were properly filed in the Department of State on the 13th day of December, 2001, and
pursuant to the instructions set out above, and in the absence of the filing of an appropriate petition calling for a rulemaking
hearing, will become effective on the 30th day of April, 2002. (12-03)
Presented herein are proposed amendments of the Tennessee Student Assistance Corporation submitted pursuant to Tennessee Code Annotated Section 4-5-202 in lieu of a rulemaking hearing. It is the intent of the Tennessee Student Assistance Corporation to promulgate these rules without a rulemaking hearing unless a petition requesting such hearing is filed within thirty (30) days of the publication date of the issue of the Tennessee Administrative Register in which the proposed amendments are published. Such petition to be effective must be filed with the Tennessee Student Assistance Corporation, Suite 1950, Parkway Towers, located at 404 James Robertson Parkway, Nashville, Tennessee 37243-0820 and in the Department of State, Administrative Procedures Division, 8th Floor, William R. Snodgrass Tower, 312 Eighth Avenue North, Nashville, Tennessee 37243-0307, and must be signed by twenty-five (25) persons who will be affected by the amendment, or submitted by a municipality which will be affected by the amendment, or an association of twenty-five (25) or more members, or any standing committee of the General Assembly.

For copies of the entire text of the proposed amendment contact: Ron Gambill, Executive Director, Tennessee Student Assistance Corporation, 404 James Robertson Parkway, Suite 1950, Nashville, TN 37243-0820, (615) 741-1346.

The text of the proposed amendments is as follows:

**AMENDMENTS**

Rule 1640-1-16-.03, Eligibility and Application Procedures, Paragraph (2), Subparagraph (b) is amended by deleting it in its entirety and replacing it with the following new Subparagraph (b):

(b) Submit the completed TSAC-approved application by the deadline.

*Authority: T.C.A. §49-4-203 and §49-4-204.*

Rule 1640-1-16-.03, Eligibility and Application Procedures, Paragraph (3), Subparagraph (c) is amended by inserting “cumulative” between “3.5” and “grade point average” in the first sentence; and by adding the following language after the last sentence. “Selected applicants must submit an official high school transcript containing the first semester of the senior year within three weeks after selection notification. Note: An official GED score certification may be submitted in lieu of the high school transcript. An official ACT or SAT score should also be submitted as applicable.” As amended, Subparagraph (c) shall read as follows:

(c) The first selections for approximately one half of the awards will be from among those eligible with at least a 3.5 cumulative grade point average or 62 GED. The remainder of the selections will be from among all eligible applicants. Selections will be made on a scientific basis by a stratified random technique to provide for reasonable representation from each grand division among those selected throughout the State. Selected applicants must submit an official high school transcript containing the first semester of the senior year within three weeks after selection notification. Note: An official GED score certification may be submitted in lieu of the high school transcript. An official ACT or SAT score should also be submitted as applicable.

*Authority: T.C.A. §49-4-203 and §49-4-204.*

The proposed rules set out herein were properly filed in the Department of State on the 10th day of December, 2001, and pursuant to the instructions set out above, and in the absence of the filing of an appropriate petition calling for a rulemaking hearing, will become effective on the 30th day of April, 2002. (12-02)
PUBLIC NECESSITY RULES

PUBLIC NECESSITY RULES NOW IN EFFECT

0620 - Department of Finance and Administration - Public necessity rules complying with or to implement the provisions of any federal waiver permitted under the TennCare Medical Assistance Program, chapter 1200-13-12 Bureau of TennCare, 10 T.A.R. (October 2001) - Filed September 28, 2001; effective through March 12, 2002. (09-31)

1200 - Department of Health, Bureau of Health Services Administration, Division of General Environmental Health - Public necessity rules dealing with licensure of body piercing technicians, permitting and inspection of body piercing establishments, and regulating body piercing procedures, Chapter 1200-23-6 Body Piercing, 10 T.A.R. (October 2001) - Filed September 6, 2001; effective through February 18, 2002. (09-01)

1240 - Department of Human Services - Adult and Family services Division - Public Necessity Rules dealing with a mandatory report card and a voluntary rated licensing system for the purpose of evaluating, individually and collectively, all child care agencies licensed or approved by the Department, chapter 1240-4-7 Report Cards and Rated Licensing for Child Care Agencies, 9 T.A.R. (September 2001) - Filed August 4, 2001; effective through January 13, 2002. (08-02)


Pursuant to Chapter No. 209 of the Public Acts of 2001, the Commissioner of Commerce and Insurance, in consultation with the Commissioner of Health, shall develop and promulgate by rule a uniform TennCare claims process not later than January 1, 2002. The rule should also contain standardized instructions for completing the form and creates standardized responses to questions and other information required on the form, for providers and managed care organizations participating in the TennCare program to use in the submission of claims by providers seeking payment.

Chapter 209 also provided that TennCare Participating Managed Care organizations be afforded direct involvement in the development of this process. According to the Chapter, the Commissioner was required to notify all managed care organizations no less than ten (10) days prior to any meeting concerning the development of this process. The Chapter contemplated a deliberation process to address the complexity of claims, state and federal medical claims requirements, and the bringing together of disparate methodologies among the managed care organizations and the medical providers. Meetings were held on the following dates: September 21, 2001; October 8, 2001; October 24, 2001; November 14, 2001 and November 28, 2001. All managed care organizations were notified and verification of notification received. All managed care organizations were represented at these meetings. In addition, officials from the Tennessee Department of Health, the TennCare Bureau of the Department of Finance and Administration, the Tennessee Medical Association, and the Tennessee Hospital Association participated in the meetings. This process was completed on December 10, 2001.

The deliberation process required in the development of these rules precluded the utilization of rulemaking procedures required elsewhere in the Uniform Administrative Procedures Act. Therefore, in order to meet Chapter 209’s deadline of January 1, 2001, the Department of Commerce and Insurance is utilizing public necessity rulemaking as provided under Tenn. Code Ann. §4-5-209 so as to comply with the directives of the Tennessee General Assembly. The Department of Commerce and Insurance is also filing a Notice of Rulemaking Hearing to adopt these public necessity rules as permanent rules.

For a copy of the entire text of this notice contact: Julie W. Buhrman, Staff Attorney, 312 Eighth Avenue North, twenty-fifth Floor, William R. Snodgrass Tennessee Tower, Nashville, Tennessee 37243, Department of Commerce and Insurance, telephone (615) 741-2199.

Anne B. Pope
Commissioner
Department of Commerce and Insurance
SUBSTANCE OF PROPOSED RULES

CHAPTER 0780-1-73
UNIFORM CLAIMS PROCESS FOR TENNCARE
PARTICIPATING MANAGED CARE ORGANIZATIONS

NEW RULES

TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>0780-1-73-.01</td>
<td>Authority</td>
</tr>
<tr>
<td>0780-1-73-.02</td>
<td>Purpose and Scope</td>
</tr>
<tr>
<td>0780-1-73-.03</td>
<td>Definitions</td>
</tr>
<tr>
<td>0780-1-73-.04</td>
<td>Uniform Forms Required</td>
</tr>
<tr>
<td>0780-1-73-.05</td>
<td>Severability and Preemption</td>
</tr>
</tbody>
</table>

0780-1-73-.01 AUTHORITY. These rules are promulgated pursuant to the authority granted by Tenn. Pub. Acts ch. 209, § 1, T.C.A. § 56-32-218(a).


0780-1-73-.02 PURPOSE AND SCOPE.

(1) Purpose. These rules designate a uniform TennCare claims process, which contains standardized instructions for completing the form and creates standardized responses to questions and other information required on the form, for providers and managed care organizations participating in the TennCare program to use in the submission of claims by providers seeking payment.

(2) Scope. These rules apply to the TennCare bureau, TennCare program and TennCare Partners program health claims and encounter data reporting.

(a) Except as otherwise specifically provided, the requirements of these rules apply to TennCare health maintenance organizations (HMOs), TennCare Partners program behavioral health organizations (BHOs), TennCare program providers, and TennCare Partners program providers that contract directly with the State and have claims processing responsibility, including, but not limited to, TennCare program and TennCare Partners program prepaid limited health service organizations (PLHSOs).

(b) These rules do not prohibit an issuer from requesting additional information required to determine eligibility of the claim under the terms and conditions of the TennCare program or the TennCare Partners program.

(c) These rules do not prohibit an HMO, BHO, or provider from using capitation payment methodology, daily rate methodology or other similar arrangements for compensating providers.

(d) These rules do not exempt a provider or HMO or BHO from data reporting requirements under state or federal law or regulation.

0780-1-73-.03 DEFINITIONS. As used in these rules, unless the context requires otherwise:

(1) Uniform Claim Forms
   (a) “UB-92, HCFA-1450 or CMS-1450” means the health insurance claim form maintained by HCFA/CMS for use by institutional care providers. Currently this form is known as the UB-92.
   (b) “HCFA-1500 or CMS-1500 (12-90)” means the health insurance claim form maintained by HCFA/CMS for use by health care providers.
   (c) “American Dental Association, 1999 Version 2000” means the uniform dental claim form approved by the American Dental Association (ADA) for use by dentists, as amended or updated by the American Dental Association.
   (d) “NCPDP” means the National Council for Prescription Drug Program’s claim form or its electronic counterpart.

(2) Uniform Claim Codes
   (a) “ASA Codes” means the codes contained in the ASA Relative Value Guide developed and maintained by the American Society of Anesthesiologists to describe anesthesia services and related modifiers.
   (b) “CDT-3 Codes” means the current dental terminology prescribed by the American Dental Association, including the terminology updates and revision issued in the future by the American Dental Association.
   (d) “ICD-9-CM Codes” means the diagnosis and procedure codes in the International Classification of Diseases, Ninth Revision, clinical modifications published by the U.S. Department of Health and Human Services.
   (e) “NDC” means the National Drug Codes of the Food and Drug Administration.
   (f) “UB-92 Codes” means the code structure and instructions established for use by the National Uniform Billing Committee.

(3) “Managed Care Organization” means TennCare program HMO or TennCare Partners program BHO that pays for, or reimburses for, the costs of health care expenses.

(4) “Provider” means any person, partnership, association, corporation or other facility or institution that renders or causes to be rendered health care or professional services to TennCare program enrollees or TennCare Partners program enrollees, and officers, employees or agents of any of the above acting in the course and scope of their employment.

(5) “HCFA or CMS” means the Centers for Medicare & Medicaid Services, formerly known as the Health Care Financing Administration of the U.S. Department of Health and Human Services.

0780-1-73-.04 UNIFORM FORMS REQUIRED.

(1) Uniform Forms Required. TennCare program HMOs and TennCare Partners program BHOs shall accept and may require the applicable uniform claim forms completed with the uniform claim codes.

(2) Submission of Uniform Forms:

(a) For the purposes of submitting the HCFA-1500/CMS-1500 form, providers should complete the form in accordance with the instructions appended hereto as Appendix A to these rules.

(b) For the purposes of submitting the HCFA-1450/CMS-1450 (UB-92) form, providers should complete the form in accordance with the Medicare instructions.

(c) For the purposes of submitting the “American Dental Association, 1999 Version 2000” uniform dental claim form approved by the American Dental Association for use by dentists, as amended or updated by the American Dental Association, providers should complete the form in accordance with ADA instructions.

(d) For the purposes of submitting the NCPDP prescription drug claim form or its electronic counterpart, providers should complete the form in accordance with NCPDP instructions.

(e) CPT Code Usage. For the purposes of these rules, providers are authorized to use the expiring or updated CPT codes on claims submitted during the period January 1 through March 31 of each year. From April 1 through December 31 of each year, however, providers must use the updated/current CPT codes.

(f) CTD Code Usage. For the purposes of these rules, dentist providers shall utilize the most current CDT codes as required by the federal Health Insurance Portability and Accountability Act of 1996, Pub.L. 104-191, Aug. 21, 1996, 110 Stat. 1936 (HIPAA) rules and regulations for commercial dental benefit programs.

(g) ICD-9 Code Usage. For the purposes of these rules, providers are authorized to use the expiring or updated ICD-9 codes on claims submitted during the period October 1 through subsequent March 31 of each year. From April 1 through December 31 of each year however, providers must use the updated/current ICD-9 codes.

0780-1-73-.05 SEVERABILITY AND PREEMPTION.

If any provision of these rules or the application to any person or circumstance is for any reason held to be invalid, the remainder of the rules and the application of the provisions to other persons or circumstances shall not be affected. If any provision of these rules or the application to any person or circumstance conflict with the requirements of the federal Health Insurance Portability and Accountability Act (HIPAA), the requirements of HIPAA shall control.


The public necessity rules set out herein were properly filed in the Department of State on the 31st day of December, 2001, and will be effective from the date of filing for a period of 165 days. These public necessity rules will remain in effect through the day of the 14th day of June 2002. (12-27)
There will be a hearing before the Commissioner of Commerce and Insurance to consider the promulgation of rules pursuant to Public Acts 2001, Chapter 209 and T.C.A. § 56-32-218(a). The hearing will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in room 160 of the Davy Crockett Tower located at 500 James Robertson Parkway in Nashville, Tennessee at 10:00 a.m. CST on the 28th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings (to review these filings) should contact the Department of Commerce and Insurance to discuss any auxiliary aids or services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date (the date the party intends to review such filings), to allow time for the Department to determine how it may reasonably provide such aid or service. Initial contact may be made with Verna Norris, the Department’s ADA Coordinator, at 500 James Robertson Parkway, 5th Floor, Nashville, Tennessee 37243 (615) 741-0481.

For a copy of this notice of rulemaking hearing, contact: Julie W. Buhrman, Staff Attorney, Department of Commerce and Insurance, 25th Floor, Tennessee Tower, 312 Eighth Avenue North. Nashville, TN 37243, telephone (615) 741-2199.

0780-1-73-.01  AUTHORITY.  These rules are promulgated pursuant to the authority granted by Tenn. Pub. Acts ch. 209, § 1, T.C.A. § 56-32-218(a).

0780-1-73-.02 PURPOSE AND SCOPE.

(1) Purpose. These rules designate a uniform TennCare claims process, which contains standardized instructions for completing the form and creates standardized responses to questions and other information required on the form, for providers and managed care organizations participating in the TennCare program to use in the submission of claims by providers seeking payment.

(2) Scope. These rules apply to the TennCare bureau, TennCare program and TennCare Partners program health claims and encounter data reporting.

(a) Except as otherwise specifically provided, the requirements of these rules apply to TennCare health maintenance organizations (HMOs), TennCare Partners program behavioral health organizations (BHOs), TennCare program providers, and TennCare Partners program providers that contract directly with the State and have claims processing responsibility, including, but not limited to, TennCare program and TennCare Partners program prepaid limited health service organizations (PLHSOs).

(b) These rules do not prohibit an issuer from requesting additional information required to determine eligibility of the claim under the terms and conditions of the TennCare program or the TennCare Partners program.

(c) These rules do not prohibit an HMO, BHO, or provider from using capitation payment methodology, daily rate methodology or other similar arrangements for compensating providers.

(d) These rules do not exempt a provider or HMO or BHO from data reporting requirements under state or federal law or regulation.


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(e) “NDC” means the National Drug Codes of the Food and Drug Administration.

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(4) “Provider” means any person, partnership, association, corporation or other facility or institution that renders or causes to be rendered health care or professional services to TennCare program enrollees or TennCare Partners program enrollees, and officers, employees or agents of any of the above acting in the course and scope of their employment.

(5) “HCFA or CMS” means the Centers for Medicare & Medicaid Services, formerly known as the Health Care Financing Administration of the U.S. Department of Health and Human Services.


0780-1-73-.04 UNIFORM FORMS REQUIRED.

(1) Uniform Forms Required. TennCare program HMOs and TennCare Partners program BHOs shall accept and may require the applicable uniform claim forms completed with the uniform claim codes.

(2) Submission of Uniform Forms:

(a) For the purposes of submitting the HCFA-1500/CMS-1500 form, providers should complete the form in accordance with the instructions appended hereto as Appendix A to these rules.

(b) For the purposes of submitting the HCFA-1450/CMS-1450 (UB-92) form, providers should complete the form in accordance with the Medicare instructions.

(c) For the purposes of submitting the “American Dental Association, 1999 Version 2000” uniform dental claim form approved by the American Dental Association for use by dentists, as amended or updated by the American Dental Association, providers should complete the form in accordance with ADA instructions.

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If any provision of these rules or the application to any person or circumstance is for any reason held to be invalid, the remainder of the rules and the application of the provisions to other persons or circumstances shall not be affected. If any provision of these rules or the application to any person or circumstance conflict with the requirements of the federal Health Insurance Portability and Accountability Act (HIPAA), the requirements of HIPAA shall control.

## Appendix A – Instructions for Completion of HCFA-1500/CMS-1500 Claim Forms

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Block 1</td>
<td>Type of Plan</td>
<td>Place an X in the box to indicate the type of insurance.</td>
</tr>
<tr>
<td>Block 1a</td>
<td>Insured's ID Number</td>
<td>Provide the TennCare enrollee patient identification number for the HMO/BHO being billed from the enrollment materials provided to the enrollee, i.e., ID card, etc.</td>
</tr>
<tr>
<td>Block 2</td>
<td>Member's Name</td>
<td>List the patient’s last name first, followed by the first name and middle initial (if any). Enter the name exactly as shown on the TennCare health insurance card or other official TennCare notice.</td>
</tr>
<tr>
<td>Block 3</td>
<td>Member's Date of Birth</td>
<td>Enter the patient’s date of birth and sex. Enter the patient’s birth date in numerical format, using two (2) digits for the month, two (2) for the day and four (4) for the year, for a total of eight (8) digits. Check the box that indicates the sex of the patient.</td>
</tr>
<tr>
<td>Block 4</td>
<td>Insured's Name</td>
<td>Enter the name of the insured person only if that person’s insurance either through the patient’s or spouse’s employment or any other source is primary to TennCare. If TennCare is the primary insurance, leave this item blank. Enter the insured’s name in order of last name, first name and middle initial (if any). If the patient indicated in Item 2 and the insured are the same, enter the word “same”.</td>
</tr>
<tr>
<td>Block 5</td>
<td>Member's Address and Telephone Number</td>
<td>Enter the patient’s complete mailing address and telephone number. Provide the patient’s complete and current mailing address, including the number and street on the first line, the city and state on the second line, and a valid zip code and the telephone number (with area code) on the third line. If the patient lives in a nursing home or other extended-care facility, provide the facility’s address.</td>
</tr>
<tr>
<td>Block 6</td>
<td>Member's Relationship to Insured</td>
<td>Enter the item indicating the patient’s relationship to the primary insured individual. The choices are “self”, &quot;spouse&quot;, &quot;child&quot; and &quot;other&quot;. Complete this item only if Item 4 is completed. Otherwise, leave this item blank.</td>
</tr>
</tbody>
</table>
### Appendix A – Instructions for Completion of HCFA-1500/CMS-1500 Claim Forms

<table>
<thead>
<tr>
<th>Block</th>
<th>Description</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Block 7</strong></td>
<td>Insured's Address</td>
<td>Enter the address (including street, city, state and zip code) and telephone number of the insured individual indicated in Items 4 and 11. Complete this item only if Items 4 and 11 are completed. If the address and telephone number are the same as the patient's, as indicated in Item 5, enter the word &quot;same&quot;. If the insured's address is &quot;in care of&quot; someone else, enter the &quot;c/o&quot; reference in the first three positions on the first line of the insured's address.</td>
</tr>
<tr>
<td><strong>Block 8</strong></td>
<td>Member Status</td>
<td>Place an X in the appropriate boxes pertaining to marital status and employment status. The choices for the patient's marital status are &quot;single&quot;, married&quot; and &quot;other&quot;. The choices for employment status are &quot;employed&quot;, &quot;full-time student&quot; and &quot;part-time student&quot;. Check all applicable boxes.</td>
</tr>
<tr>
<td><strong>Block 9</strong></td>
<td>Other Insured's Name</td>
<td>Enter the name of the insured individual who is enrolled in any other policy if the name is different from that shown in Item 2. Enter the word &quot;same&quot; if the name is the same for Item 2. If no other policy benefits are assigned, leave this item blank. The name of the insured individual is entered in the order of the last name, first name and middle initial. (For additional information see instructions.)</td>
</tr>
<tr>
<td><strong>Block 9a</strong></td>
<td>Other Insured's Policy Number</td>
<td>Enter the policy or group number of the other insurance coverage for the enrollee. If the patient does not have other insurance coverage, leave this item blank.</td>
</tr>
<tr>
<td><strong>Block 9b</strong></td>
<td>Other Insured's Date of Birth</td>
<td>Enter the eight (8)-digit date of birth and the sex of the person you have identified in Block 9. If the patient does not have other coverage, leave this item blank.</td>
</tr>
<tr>
<td><strong>Block 9c</strong></td>
<td>Employer Name or School Name</td>
<td>Enter the employer name or school name of the person listed in Block 9.</td>
</tr>
<tr>
<td><strong>Block 9d</strong></td>
<td>Insurance Plan Name or Program Name</td>
<td>Enter the name of the other insured's health insurance organization plan name or program name for the person shown in Block 9.</td>
</tr>
<tr>
<td><strong>Block 10a</strong></td>
<td>Employment – Related Condition</td>
<td>Indicate whether the patient's condition is related to his or her employment and is applicable to one (1) or more of the services described in Item 24. If the patient's condition is related to employment, put an X in the &quot;yes&quot; box and indicate whether it is related to the patient's &quot;current&quot; or &quot;previous&quot; employment by circling the appropriate term. If the injury or illness is related to an automobile accident, place an X in the &quot;yes&quot; box. Enter the date of the accident in Item 14 in eight (8)-digit format. If the patient's condition is related to an &quot;other accident&quot;, place an X in the &quot;yes&quot; box. Enter the date of the accident in Item 14. File the claim with the other insurer as the primary payer (Item 11). Once a response (either a payment or denial notice) is received from the primary insurer, file the secondary claim with TennCare MCO/BHO.</td>
</tr>
<tr>
<td><strong>Block 10d</strong></td>
<td>(Reserved for local use)</td>
<td>This item is not used for the TennCare program. Leave blank.</td>
</tr>
</tbody>
</table>
### Appendix A – Instructions for Completion of HCFA-1500/CMS-1500 Claim Forms

<table>
<thead>
<tr>
<th>Block</th>
<th>Field</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td>Insured's Policy Group or FECA Number</td>
<td>Enter the policy, group or FECA identification number of any insurer that is primary to TennCare. By completing this item, the physician or supplier acknowledges having made a good-faith effort to determine whether TennCare is the primary or secondary payer. Do not leave this item blank. If there is no insurance primary to TennCare, enter the word &quot;none&quot; and proceed to Item 12. If there is insurance primary to TennCare, enter the insured's policy or group number and complete Item 11a.</td>
</tr>
<tr>
<td>11a</td>
<td>Insured's Date of Birth</td>
<td>Enter the date of birth and sex of the insured (if the insured is not the patient) in the eight (8)-digit format. Place an X in the appropriate box to indicate the insured's sex.</td>
</tr>
<tr>
<td>11b</td>
<td>Employer Name or School Name</td>
<td>Enter the employer name, if applicable. If there has been a recent change in the insured's insurance status enter the date of the change preceded by a brief description of the change.</td>
</tr>
<tr>
<td>11c</td>
<td>Insurance Plan Name or Program Name</td>
<td>Enter the complete name of the insurance plan or program that is primary to TennCare.</td>
</tr>
<tr>
<td>11d</td>
<td>Is there another insurance plan?</td>
<td>Indicate whether there is another health benefit plan primary to TennCare.</td>
</tr>
<tr>
<td>12</td>
<td>Patient’s or Authorized Person’s Signature (Information Release / Government Assignment)</td>
<td>This item contains the signature of the patient or the patient's representative and the date in the eight (8)-digit format. The signature authorizes the release of medical information necessary to process the claim and the payment of benefits to the physician or supplier if the physician/supplier accepts assignment. In lieu of a signature on the claim, enter &quot;SOF&quot; in this item if there is a &quot;signature on file&quot; agreement with the provider. (For additional information see instructions.)</td>
</tr>
<tr>
<td>13</td>
<td>Insured's or Authorized Person's Signature (Payment Authorization)</td>
<td>For non-government programs, an assignment of benefits separate from the information release (Block 12) is required if benefits are to be sent to the provider. The patient must sign in this block if payment to the provider is desired, or the patient/insured's signature on a separate document must be maintained in the patient's file (enter &quot;ON FILE&quot;), or some provider agreements (PPO's, HMO's, etc.) specifically address how payments are to be handled, in which case leave the block blank. However, it is still advisable to obtain an assignment of benefits from the patient or patient's representative if payment is to go to your office. Do not make any notation in this space if payment is to go to the patient.</td>
</tr>
<tr>
<td>14</td>
<td>Date of Current Illness, Injury, or Pregnancy</td>
<td>Enter the date of the current illness (first symptom), injury (accident) or pregnancy (last menstrual period, or LMP) in the eight (8)-digit format. This information is necessary to determine the effective date of TennCare secondary payer coverage. If an accident date is provided, complete Item 10b or 10c. For chiropractic services, enter the date of the initiation of the course of treatment and the eight (8)-digit x-ray date in Item 19. This item is not required for TennCare billing unless the services were rendered as the result of an accident or injury that may be covered by another insurer.</td>
</tr>
</tbody>
</table>
## Appendix A – Instructions for Completion of HCFA-1500/CMS-1500 Claim Forms

| Block 15 | If Patient has had Same or Similar Illness | Enter (if applicable) the date that the patient first had the same or a similar illness. When billing TennCare, leave this item blank since it is not required. |
| Block 16 | Dates Patient Unable to Work in Current Occupation | This item identifies the dates that the patient was employed but unable to work in his or her current occupation and may indicate employment-related insurance coverage. The eight (8)-digit format must be used in this item. Completion of this field is important for worker's compensation cases. An entry in this field may indicate employment-related insurance coverage. |
| Block 17 and 17A | Name of Referring Physician or Other Source and ID Number of Referring Physician | This field contains the complete name of the physician who requests or orders a service or item. A referring physician is a physician who requests a service or item for the patient for which payment may be made under the TennCare program. An ordering physician is a physician who orders a nonphysician service or item for the patient, such as diagnostic laboratory test, clinical laboratory test, durable medical equipment or pharmaceutical services. This item contains the NPI (UPIN) of the referring or ordering physician listed in Item 17. The NPI (UPIN) is assigned to the physician by CMS/HCFA. |
| Block 18 | Hospitalization Dates | Enter the applicable month, day and year of the hospital admission and discharge using an eight (8)-digit date format. This item is to be completed when medical services are rendered as a result of, or subsequent to, a related hospitalization. If services were rendered in a facility other than the patient's home or a physician's office, provide the name and address of that facility in Item 32. |
| Block 19 | (Reserved for local use) | This block is not required by TennCare program HMOs/BHOs. Leave blank. |
| Block 20 | Outside Lab | Indicate whether any diagnostic tests subject to purchase price limitations were performed outside the physician's office, and enter the charges for those purchased services. Place an X in the "yes" box when a provider other than the provider billing for the service performed the diagnostic test. When "yes" is checked, Item 32 must be completed with the name and address of the clinical laboratory or other supplier that performed the service. If billing for multiple purchased diagnostic test, each test must be submitted on a separate claim form. Enter the purchase price of the tests in the charges column. Show dollars and cents, omitting the dollar sign. Place an X in the "no" box when diagnostic tests are performed in the physician's office or supervised by the physician (e.g., no purchased tests are included on the claim). |
| Block 21 | Diagnosis or Nature of Illness or Injury | Enter the ICD-9-CM codes for the diagnoses, conditions, problems or other reasons for the encounter or visit. All physician specialties must use an ICD-9-CM code number and code up to the highest level of specificity. Report at least one diagnosis code on the claim. You may report up to four (4) codes in order of priority (primary, secondary conditions, etc.) to accurately describe the reason for the encounter. List first the code for the diagnosis, condition, problem, etc., shown in the medical record to be chiefly responsible for the service provided, then list codes that describe coexisting conditions. |
Appendix A – Instructions for Completion of HCFA-1500/CMS-1500 Claim Forms

<table>
<thead>
<tr>
<th>Block 22</th>
<th>Medicaid (TennCare℠) Resubmission</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This item contains the code and original reference number of a TennCare/Medicaid claim and is completed when the claim must be resubmitted. When billing Medicare, leave this item blank.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Block 23</th>
<th>Prior Authorization Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Enter the authorization number(s) assigned by the HMO/BHO for appropriate procedures.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Block 24a</th>
<th>Dates of Service</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This item indicates the beginning and ending dates of service for the entire period reflected by the procedure code, using the eight (8)-digit format, excluding all punctuation. Do not use slashes between dates. If the date or month is a single digit, precede it with a zero (0). Make sure the dates shown are no earlier than the date of the current illness shown in Item 14. If the same service is furnished on different dates, each date should be listed on the claim. For services performed on a single day, the &quot;from&quot; and &quot;to&quot; dates are the same. (For additional information see instructions).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Block 24b</th>
<th>Place of Service</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>This item indicates the site of service where services were rendered or an item was utilized. Enter the appropriate two (2)-digit numeric code pertaining to the place of service. If services were provided in the emergency department, use code 23. If services were provided in an urgent care center, use code 22. If services were rendered in a hospital, clinic, laboratory or other facility, show the name and the address of the facility in Item 32.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Block 24c</th>
<th>Type of Service</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Enter the Medicare codes describing the type of service rendered.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Block 24d</th>
<th>Procedures, Services, or Supplies</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Enter the CPT codes applicable to the services, procedures or supplies rendered. Include CPT modifiers when necessary. The codes and modifiers selected must be supported by medical documentation in the patient's record. Link each CPT code with the appropriate ICD-9-CM code listed in Items 21 and 24e. Enter the specific procedure code without a descriptive narrative. If no specific procedure codes are available that fully describe the procedure performed, and an &quot;unlisted&quot; or &quot;not otherwise classified&quot; procedure code must be used, include the narrative description in Item 19.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Block 24e</th>
<th>Diagnosis Code</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Indicate reference numbers linking the ICD-9-CM codes listed in Item 21 to the dates of service and CPT codes listed in Items 24a and 24d. The information is used to document that the patient's diagnosis warranted the physician's services. Enter only one (1) reference number per line item. When multiple services are performed, enter the primary reference number for each service. In a situation where two (2) or more diagnoses are required for a procedure code, you must reference only one (1) of the diagnoses in Item 21.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Block 24f</th>
<th>Charges</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Enter the amount charged by the physician for each of the services or procedures listed on the claim. If multiple occurrences of the same procedure are being billed on the same line, indicate the inclusive dates of service in Item 24a. List the separate charge for each service in this item and the number of units or days in Item 24g. Do not bill a flat fee for multiple dates of service on one line.</td>
</tr>
</tbody>
</table>
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<tr>
<td>24g</td>
<td>Days or Units</td>
<td>This item shows the number of days or units of procedures, services or supplies listed in Item 24d. This field is most commonly used to report multiple visits, units of supplies, minutes of anesthesia and oxygen volume. The number &quot;1&quot; must be entered if only one service is performed. For some services (e.g., hospital visits, test, treatments, doses of an injectable drug, etc.), indicate the actual quantity provided. When the number of days is reported, it is compared with the inclusive dates of service listed in Item 24a. Days usually are reported when the patient has been hospitalized. When billing radiology services, do not provide the number of x-ray views in this column. Use the appropriate procedure code to report the number of views. However, when the same radiology procedure is performed more than once on the same day, the number of times should be shown in this item. Anesthesia claims must be reported in minutes.</td>
</tr>
<tr>
<td>24h</td>
<td>EPSDT</td>
<td>Enter &quot;Y&quot; for &quot;yes&quot; and &quot;N&quot; for &quot;no&quot; to indicate that early and periodic screening, diagnosis and treatment (EPSDT) services were provided. EPSDT applies only to children who are under 21 and receive medical benefits through public assistance.</td>
</tr>
<tr>
<td>24i</td>
<td>EMG</td>
<td>This item indicates that the service was rendered in a hospital emergency department. When this item is checked, show place-of-service code 23 (hospital emergency department) in Item 24b.</td>
</tr>
<tr>
<td>24j and 24k</td>
<td>24j Coordination of Benefits (COB) and 24k (Reserved for local use)</td>
<td>This block is not required by TennCare program HMOs/BHOs. Leave blank.</td>
</tr>
<tr>
<td>25</td>
<td>Federal Tax ID or SSN</td>
<td>Enter the federal tax identification number of the physician or supplier. The number may be the Social Security number (SSN) or the federal tax ID number/employee identification number (EIN). Designate whether number listed is SSN or EIN by placing an &quot;X&quot; in the appropriate box.</td>
</tr>
<tr>
<td>26</td>
<td>Patient’s Account Number</td>
<td>The patient’s account number assigned by the physician’s or supplier’s accounting system should be entered in Item 26. The patient’s account number is used by the provider for retrieving individual patient accounts and case records and for posting payment.</td>
</tr>
<tr>
<td>27</td>
<td>Accept Assignment</td>
<td>If the physician or supplier agrees to accept the charge allowed by TennCare as the full payment for the service, place an X in the &quot;yes&quot; box. This establishes this claim as an assigned claim. A TennCare participating physician must always check the &quot;yes&quot; box.</td>
</tr>
<tr>
<td>28</td>
<td>Total Charge</td>
<td>Enter the dollars and cents, omitting the dollar sign. Also, verify that this amount equals the total of the charges listed in Item 24f. To bill a Medicare secondary payer (MSP) claim, bill the full amount of the charges in this item. Do not report the difference between what the primary payer paid and the total charges or the allowed amounts. Attach a copy of the primary payer’s explanation of benefits (EOB) that contains the payment information.</td>
</tr>
<tr>
<td>29</td>
<td>Amount Paid</td>
<td>This item must be completed when billing TennCare as the secondary payer. Enter the amount paid by the patient-for covered services only—using dollars and cents, omitting the dollar sign.</td>
</tr>
</tbody>
</table>
### Appendix A – Instructions for Completion of HCFA-1500/CMS-1500 Claim Forms

<table>
<thead>
<tr>
<th>Block 30</th>
<th>Balance Due</th>
<th>Enter difference between Block 28 and Block 29.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Block 31</td>
<td>Signature of Physician or Supplier</td>
<td>Enter the signature of the physician or supplier, or a representative, and the date the claim form was signed in eight (8)-digit format. The provider or his or her authorized representative must sign the provider's name, or an approved facsimile stamp may be used. Type the provider's full name below the signature or stamp. Do not enter the name of an association or corporation in this field.</td>
</tr>
<tr>
<td>Block 32</td>
<td>Name and Address of Facility Where Services Were Rendered</td>
<td>Enter the name and address of the facility where the services were furnished if they were furnished in a hospital, clinic, laboratory, or any facility other than the patient's home or physician's office. A complete address includes the zip code, which allows carriers to determine the correct pricing locality for purposes of claims payment. When the name and the address of the facility where services were furnished is the same as the name and address shown in Item 33, enter the word &quot;same&quot;. (For additional information see instructions.)</td>
</tr>
<tr>
<td>Block 33</td>
<td>Physician's, Supervising Physician's and Supplier's Billing Name, Address</td>
<td>Enter the name and billing address of the individual providing the claimed services. Enter the individual provider number and/or the group provider, if appropriate, number assigned by the HMO/BHO to whom the services are being billed.</td>
</tr>
</tbody>
</table>

The notice of rulemaking set out herein was properly filed in the Department of State on the 31st day of December, 2001. (12-26)
DEPARTMENT OF HEALTH - 1200
BOARD FOR LICENSING HEALTH CARE FACILITIES

There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 5th Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 5th Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 5th Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-1
STANDARDS FOR HOSPITALS

AMENDMENTS

Rule 1200-8-1-.08 Building Standards. Paragraph (3) is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the new rule shall read:

(3) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, and the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A, the 1999 National Electrical Code and the 2001 Edition of the Guidelines for Design and Construction of Hospital and Health Care Facilities. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-1-.08 Building Standards. Paragraph (4) is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the new rule shall read:

(4) All new construction and renovations to hospitals, other than minor alterations not affecting fire and life safety on functional issues, shall be performed in accordance with the specific requirements of these regulations governing new construction in hospitals, including the submission of phased construction plans and the final work drawings and the specifications to each. Phased construction plans, final work drawings, and specifications shall also be submitted prior to any change in hospital type (e.g. acute care hospital to psychiatric hospital).

Rule 1200-8-1-.08 Building Standards. Paragraph (5) is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the new rule shall read:
(5) No new hospital shall hereafter be constructed, nor shall major alterations be made to existing hospitals, or change in hospital type be made without the prior written approval, and unless in accordance with plans and specifications approved in advance by the department. Before any new hospital is licensed or before any alterations or expansion of a licensed hospital can be approved, the applicant must furnish two (2) complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations, other than minor alterations not affecting fire and life safety or functional issues shall be prepared by or under the direction of a licensed architect and/or a qualified licensed engineer.

Rule 1200-8-1-.08 Building Standards. Paragraph (6) of is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the new rule shall read:

(6) In the event that submitted materials do not appear to satisfactorily comply with 1200-8-1-.08 (3) the department shall furnish a letter to the party submitting the plans which shall list the particular items in question and request further explanation and/or confirmation of necessary modifications.

Rule 1200-8-1-.08 Building Standards. Paragraph (8) is amended by deleting the number “13” and substituting instead the number “19” so that as amended the new paragraph shall read:

(8) Existing facilities shall comply with Chapter 19 of NFPA 101 and all of these regulations except in Paragraph (3) above.

Rule 1200-8-1-.08 Building Standards. Subparagraph (10)(a) is amended in the first and second sentences by deleting the word “preliminary” and substituting instead the term “phased construction” so that as amended the new paragraph shall read:

(a) A phased construction plan shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval must be received before proceeding beyond foundations work.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-07)
Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 5th Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 5th Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-2
STANDARDS FOR PRESCRIBED CHILD CARE

AMENDMENTS

Rule 1200-8-2-.07 Building Standards. Paragraph (1) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the rule shall read:

(1) For the purpose of life safety, PCCC facilities are required to meet business occupancies and shall comply with the applicable standards of the Life Safety Code of the National Fire Protection Association, 2000 edition, Business Occupancies, Chapter 38 (new) or Chapter 39 (existing) and the 1999 Standard Building Codes.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-08)
AMENDMENTS

Rule 1200-8-6-.08 Building Standards. Paragraph (2) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the rule shall read:

(2) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, and the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A, the 1999 National Electrical Code and the 2001 Edition of the Guidelines for Design and Construction of Hospital and Health Care Facilities. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-6-.08 Building Standards. Paragraph (3) is amended in the first and second sentences by deleting the word “preliminary” and substituting instead the term “phased construction” so that as amended the new rule shall read:

(3) All new construction and renovations to existing nursing home, other than alterations not affecting fire and life safety or functional issues, shall be performed in accordance with the specific requirements of these rules governing new construction in nursing homes, including the submission of phased construction plans and the final work drawings and specifications to each.

Rule 1200-8-6-.08 Building Standards. Paragraph (4) is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the new rule shall read:

(4) No new nursing home shall be constructed, nor shall major alterations be made to existing nursing homes, without prior written approval of the department. Before any new nursing home is licensed or before any alteration or expansion of a licensed nursing home can be approved, the applicant must furnish two (2) complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations shall be prepared by or under the direction of a licensed architect and/or a qualified licensed engineer.

Rule 1200-8-6-.08 Building Standards. Paragraph (5) of is amended by deleting the term “1996-97” and substituting instead the number “1999” so that as amended the new paragraph shall read:

(5) In the event that submitted materials do not appear to satisfactorily comply with 1200-8-6-.08 (2) the “Guidelines for Design and Construction of Hospitals and Health Care Facilities” 1999 edition, the department shall furnish a letter to the party submitting the plans which shall list the particular items in question and request further explanation and/or confirmation of necessary modifications.

Rule 1200-8-6-.08(7) Building Standards. Subparagraph (a) is amended by deleting “A plan” in the first sentence and substituting instead the term “Two sets of plans” so that as amended the new sentence shall read:

(a) Two sets of plans shall be forwarded to the appropriate section of the department for review.

The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-09)

DEPARTMENT OF HEALTH - 1200
BOARD FOR LICENSING HEALTH CARE FACILITIES

There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 5th Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 5th Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 5th Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-10
STANDARDS FOR AMBULATORY SURGICAL TREATMENT CENTERS

AMENDMENTS

Rule 1200-8-10-.08 Building Standards. Paragraph (3) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the rule shall read:

(3) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A, the 1999 National Electrical Code and the 2001 Edition of the Guidelines for Design and Construction of Hospital and Health Care Facilities. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-10-.08 Building Standards. Paragraph (4) is amended by deleting the term “preliminary” and substituting instead the term “phased construction” so as amended the new rule shall read:
(4) All new construction and renovations to ASTC’s, other than minor alterations not affecting fire and life safety on functional issues, shall be performed in accordance with the specific requirements of these regulations governing new construction in facilities, including the submission of phased construction plans and the final work drawings and the specifications to each. Phased construction plans, final work drawings, and specifications shall also be submitted prior to any change in ASTC type.

Rule 1200-8-10-.08 Building Standards. Paragraph (5) is amended by deleting the paragraph in its entirety and substituting instead the following language so as amended the new rule shall read:

(5) No new ASTC shall hereafter be constructed, nor shall major alterations be made to existing facilities, or change in facility type be made without the prior written approval, and unless in accordance with plans and specifications approved in advance by the department. Before any new ASTC is licensed or before any alteration or expansion of a licensed ASTC can be approved, the applicant must furnish two complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations, other than minor alterations not affecting fire and life safety or functional issues shall be prepared by or under the direction of a licensed architect and/or qualified licensed engineer.

Rule 1200-8-10-.08 Building Standards. Paragraph (6) is amended by deleting the paragraph in its entirety and substituting instead the following language so as amended the new rule shall read:

(6) In the event that submitted materials do not appear to satisfactorily comply with 1200-8-10-.08 (3) the department shall furnish a letter to the party submitting the plans which shall list the particular items in question and request further explanation and/or confirmation of necessary modifications.

Rule 1200-8-10-.08 Building Standards. Paragraph (8) is amended by deleting the paragraph in its entirety and renumbering the remaining paragraphs accordingly.

Rule 1200-8-10-.08 Building Standards. Paragraph (9) is amended by deleting the paragraph in its entirety and renumbering the remaining paragraphs accordingly.

Rule 1200-8-10-.08(10) Building Standards. Paragraph (10) as amended shall become paragraph (8). Subparagraph (a) of new paragraph (8) is amended in the first sentence by deleting the term “A preliminary plan” and substituting instead the term “Phased construction plans” so as amended the new rule shall read:

(a) Phased construction plans shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction preliminary plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval must be received before proceeding beyond foundation work.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-10)
DEPARTMENT OF HEALTH - 1200
BOARD FOR LICENSING HEALTH CARE FACILITIES

There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 5th Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 5th Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 5th Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-11
STANDARDS FOR HOMES FOR THE AGED

AMENDMENTS

Rule 1200-8-11-.07 Building Standards. Paragraph (3) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the new rule shall read:

(3) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, and the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A and the 1999 National Electrical Code. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-11-.07 Building Standards. Paragraph (5) is amended in the second sentence by deleting the term “one (1) complete set” and substituting the term “two (2) complete sets” so as amended the new rule shall read:

(5) No new home shall be constructed, nor shall major alterations be made to existing facilities, or change in facility type be made without prior written approval, and unless in accordance with plans and specifications approved in advance by the department. Before any new facility is licensed or before any alteration or expansion of a licensed facility can be approved, the applicant must furnish two (2) complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations, other than minor alterations not affecting fire and life safety or functional issues shall be prepared by or under the direction of a licensed architect and/or a qualified licensed engineer.

Rule 1200-8-11-.07 Building Standards. Paragraph (8) is amended by deleting the term “Chapter 23” and substituting instead the term “Chapter 32” so as amended the new rule shall read:
With the submission of plans the facility shall specify the evacuation capabilities of the residents as defined in Chapter 32 of the Life Safety Code. This declaration will determine the design and construction requirements of the facility.

Rule 1200-8-11-.07 (10) Building Standards. Subparagraph (a) is amended in the first sentence by deleting the phrase “A preliminary plan” and substituting instead the term “Phased construction plans” and in the second sentence by deleting the word “preliminary” and substituting instead the term “Phased construction” so as amended the new rule will read:

(a) Phased construction plan shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval must be received before proceeding beyond foundation work.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-11)
(2) After the application and licensure fees have been submitted, the building construction plans must be submitted to
the department. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding
Chapter I, Administration and Chapter 11, Handicapped Accessibility, ANSI II), the handicap code as required by
T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, the 2000 edition of the
Edition of the Guidelines for Design and Construction of Hospital and Health Care Facilities. When referring to
height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject
to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements
in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-15-.07 Building Standards. Paragraph (3) is amended by deleting the word “Preliminary” and substituting instead
the term “phased construction” so as amended the new rule shall read:

(3) All new construction and renovations to existing facilities, other than alterations not affecting life safety functional
issues, shall be performed in accordance with the specific requirements of these regulations governing new con-
struction in residential hospices, including the submission of phased construction plans and the final work drawings
and the specifications to each.

Rule 1200-8-15-.07 Building Standards. Paragraph (4) is amended by deleting the paragraph in its entirety and substituting
instead the following language so that as amended the new rule shall read:

(4) No new residential hospice shall hereafter be constructed, nor shall major alterations be made to existing residential
hospices, without the prior written approval of the department. Before any new residential hospice is licensed or
before any alteration or expansion of a residential hospice can be approved, the applicant must furnish two (2)
complete sets of plans and specifications to the department, together with fees and other information as required.
Plans and specifications for new construction and major renovations, other than minor alterations not affecting fire
and life safety or functional issues shall be prepared by or under the direction of a licensed architect and/or a
qualified licensed engineer.

Rule 1200-8-15-.07 Building Standards. Paragraph (5) in amended by deleting the paragraph in its entirety and substituting
instead the following language so that as amended the new rule shall read:

(5) In the event that submitted materials do not appear to satisfactorily comply with 1200-8-15-.07(2), the
department shall furnish a letter to the party submitting the plans which shall list the particular items in question and
request further explanation and/or confirmation of necessary modifications.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-12)
There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 Fifth Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 Fifth Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Anita Van Tries, 425 Fifth Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-17
ALCOHOL AND OTHER DRUGS OF ABUSE RESIDENTIAL REHABILITATION TREATMENT FACILITIES

AMENDMENTS

Rule 1200-8-17-.07 Building Standards. Paragraph (3) is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the new rule shall read:

(3) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), most recent edition of the ASHRAE Handbook of Fundamentals, the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A and the 1999 National Electrical Code. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-17-.07 Building Standards. Paragraph (7) is amended by deleting the term “Chapter 22” in the first sentence and substituting instead the term “Chapter 32” so that as amended the new rule shall read:

(7) With the submission of plans the facility shall specify the evacuation capabilities of the residents as defined in Chapter 32 of the Life Safety Code. This declaration will determine the design and construction requirements of the facility.

Rule 1200-8-17-.07 Building Standards. Paragraph (8) is amended by deleting the paragraph in its entirety and renumbering the remaining paragraphs accordingly.

Rule 1200-8-17-.07 Building Standards. Paragraph (9) is amended by deleting the paragraph in its entirety and renumbering the remaining paragraph accordingly.
Rule 1200-8-17-.07 (10) Building Standards. Paragraph as amended shall become paragraph (8) Subparagraph (a) is amended in the first sentences by deleting the term “A preliminary plan” and substituting instead the term “Phased construction plans” and in the second sentence by deleting the word “preliminary” and substituting instead the term “phased construction” so that as amended the new rule shall read:

(a) Phased construction plans shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction preliminary plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval shall be received before proceeding beyond foundation work.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-13)

DEPARTMENT OF HEALTH - 1200
BOARD FOR LICENSING HEALTH CARE FACILITIES

There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 Fifth Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 Fifth Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 Fifth Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-22
ALCOHOL AND OTHER DRUGS OF ABUSE
HALFWAY HOUSE TREATMENT FACILITIES

AMENDMENTS

Rule 1200-8-22-.07 Building Standards. Paragraph (3) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the new rule shall read:
(3) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A and the 1999 National Electrical Code. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-22-.07 Building Standards. Paragraph (7) is amended by deleting the term “Chapter 22” in the first sentence and substituting instead the term “Chapter 32” so that as amended the new rule shall read:

(7) With the submission of plans the facility shall specify the evacuation capabilities of the residents as defined in Chapter 32 of the Life Safety Code. This declaration will determine the design and construction requirements of the facility.

Rule 1200-8-22-.07 Building Standards. Paragraph (8) is deleted in its entirety and the remaining paragraphs numbered accordingly.

Rule 1200-8-22-.07 Building Standards. Paragraph (9) is deleted in its entirety and the remaining paragraphs numbered accordingly.

Rule 1200-8-22-.07 (10) Building Standards. As amended, paragraph (10) becomes paragraph (8). Subparagraph (a) is amended in the first sentences by deleting the term “A preliminary plan” and substituting instead the term “Phased construction plans” and in the second sentence by deleting the word “preliminary” and substituting instead the term “phased construction” so that as amended the new rule shall read:

(a) Phased construction plans shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval shall be received before proceeding beyond foundation work.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-14)
There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 Fifth Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 Fifth Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 Fifth Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-23
ALCOHOL AND OTHER DRUGS OF ABUSE
RESIDENTIAL DETOXIFICATION TREATMENT FACILITIES

AMENDMENTS

Rule 1200-8-23-.07 Building Standards. Paragraph (3) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the new rule shall read:

(3) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A and the 1999 National Electrical Code. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-23-.07 Building Standards. Paragraph (7) is amended by deleting the term “Chapter 22” in the first sentence and substituting instead the term “Chapter 32” so that as amended the new rule shall read:

(7) With the submission of plans the facility shall specify the evacuation capabilities of the residents as defined in Chapter 32 of the Life Safety Code. This declaration will determine the design and construction requirements of the facility.

Rule 1200-8-23-.07 Building Standards. Paragraph (9) is deleted in its entirety and the remaining paragraphs numbered accordingly.

Rule 1200-8-23-.07 (10) Building Standards. As amended, paragraph (10) becomes paragraph (9). Subparagraph (a) is amended in the first sentences by deleting the term “A preliminary plan” and substituting instead the term “Phased construction plans” and in the second sentence by deleting the word “preliminary” and substituting instead the term “phased construction” so that as amended the new rule shall read:
(a) Phased construction plans shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval shall be received before proceeding beyond foundation work.

**Authority:** T.C.A. §§ 4-5-202, 68-11-202, 68-11-206 and 68-11-209.

The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-15)

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**DEPARTMENT OF HEALTH - 1200**

**BOARD FOR LICENSING HEALTH CARE FACILITIES**

There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 5th Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 5th Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 5th Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

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**SUBSTANCE OF PROPOSED RULES**

**CHAPTER 1200-8-24**

**STANDARDS FOR BIRTHING CENTERS**

Rule 1200-8-24-.07 Building Standards. Paragraph (4) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the new rule shall read:

(4) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, and the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A, the 1999 National Electrical Code and the 2001 Edition of the Guidelines for design and Construction of Hospitals and Health Care Facilities. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the
Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-24-.07 Building Standards. Paragraph (5) is amended by deleting the word “preliminary” in the in the first sentence and substituting instead the term “phased construction” and deleting the word “Preliminary” in the second sentence and substituting instead the term phased construction” so as amended the new rule shall read:

(5) All new construction and renovations to birthing centers, other than minor alterations not affecting fire and life safety or functional issues, shall be performed in accordance with the specific requirements of these regulations governing new construction in birthing centers, including the submission of phased construction plans and the final work drawings and the specifications to each. Phased construction plans, final work drawings, and specifications shall also be submitted prior to any change in facility type.

Rule 1200-8-24-.07 Building Standards. Paragraph (6) is amended by deleting the paragraph in its entirety and substituting instead the following language so as amended the new rule shall read:

(6) No new birthing centers shall hereafter be constructed, nor shall major alterations be made to existing facilities, or change in facility type be made without prior written approval, and unless in accordance with plans and specifications approved in advance by the department. Before any new birthing center is licensed or before any alteration or expansion of a licensed facility can be approved, the applicant must furnish two (2) complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations, other than minor alterations not affecting fire and life safety or functional issues shall be prepared by or under the direction of a licensed architect and/or a qualified licensed engineer.

Rule 1200-8-24-.07 Building Standards. Paragraph (7) is amended by deleting the term “1996-97” and substituting instead the number “2001” so as amended the new rule shall read:

(7) In the event that submitted materials do not appear to satisfactorily comply with 1200-8-24-.07(4) the department shall furnish a letter to the party submitting the plans which shall list the particular items in question and request further explanation and/or confirmation of necessary modifications.

Rule 1200-8-24-.07 Building Standards. Paragraph (9) is amended by deleting the term “Chapter 13” and substituting instead the term “Chapter 19” so as amended the new rule shall read:

(9) Existing facilities shall comply with Chapter 19 of NFPA 101 and all of these regulations except in paragraph (4) above.

Rule 1200-8-24-.07 (11) Building Standards. Subparagraph (a) is amended in the first sentence by deleting the term “A preliminary plan” and substituting instead the term “Phased construction plans so as amended the new rule will read:

(a) Phased construction plans shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval must be received before proceeding beyond foundation work.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-16)
DEPARTMENT OF HEALTH - 1200
BOARD FOR LICENSING HEALTH CARE FACILITIES

There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 5th Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 5th Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 5th Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-8-25
STANDARDS FOR ASSISTED-CARE LIVING FACILITIES

AMENDMENTS

Rule 1200-8-25-.07 Building Standards. Paragraph (3) is amended by deleting the paragraph in its entirety and substituting the following language so that as amended the new rule shall read:

(3) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code Residential R4 Occupancy requirements (excluding Chapter I and Section 508, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, the 2000 edition of the National Fire Protection Code (NFPA), NFPA 101 Chapter 22, new Resident Board and Care occupancy including Annex A and the 1999 National Electrical Code. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-25-.07 Building Standards. Paragraph (5) is amended in the second sentence by deleting the term “one (1) complete set” and substituting the term “two (2) complete sets” so as amended the new rule shall read:

(5) No new facility shall hereafter be constructed, nor shall major alterations be made to existing facilities, or change in facility type be made without prior written approval, and unless in accordance with plans and specifications approved in advance by the department. Before any new facility is licensed or before any alteration or expansion of a licensed facility can be approved, the applicant must furnish two (2) complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations, other than minor alterations not affecting fire and life safety or functional issues shall be prepared by or under the direction of a licensed architect and/or a qualified licensed engineer.
Rule 1200-8-25-.07 Building Standards. Paragraph (8) is amended by deleting the term “Chapter 22” and substituting instead the term “Chapter 32” so as amended the new rule shall read:

(8) With the submission of plans the facility shall specify the evacuation capabilities of the residents as defined in Chapter 32 of the Life Safety Code. This declaration will determine the design and construction requirements of the facility.

Rule 1200-8-25-.07 (10) Building Standards. Subparagraph (a) is amended in the first sentence by deleting the phrase “A preliminary plan” and substituting instead the term “Phased construction plans” and in the second sentence by deleting the word “preliminary” and substituting instead the term “Phased construction” so as amended the new rule will read:

(a) Phased construction plan shall be forwarded to the appropriate section of the department for review. After receipt of approval of phased construction plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval must be received before proceeding beyond foundation work.

Rule 1200-8-25-.08 Life Safety. Paragraph (3) is amended by deleting the number “12” and substituting the number “19” and by deleting the term “1997” and substituting instead the and the term “2001” so as amended the new rule shall read:

(3) Residents who cannot evacuate within thirteen (13) minutes may be retained in the facility so long as such residents are retained in designated areas in accordance with Chapter 18 of the NFPA 2001 Edition of the Life Safety Code and Institutional Unrestrained Occupancy of the Standard Building Code.


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-17)
Rule 1200-8-28-.08 Building Standards. Paragraph (2) is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the rule shall read:

(2) After the application and licensure fees have been submitted, the building construction plans must be submitted. All new facilities shall conform to the 1999 edition of the Standard Building Code (excluding Chapter I, Administration and Chapter 11, Handicapped Accessibility), the handicap code as required by T.C.A. §68-18-204(a), the most recent edition of the ASHRAE Handbook of Fundamentals, the 2000 edition of the National Fire Protection Code (NFPA), NFPA 1 including Annex A and the 1999 National Electrical Code. When referring to height, area or construction type, the Standard Building Code shall prevail. All new and existing facilities are subject to the requirements of the Americans with Disabilities Act (A.D.A.). Where there are conflicts between requirements in the above listed codes and regulations and provisions of this chapter, the most restrictive shall apply.

Rule 1200-8-28-.08 Building Standards. Paragraph (3) is amended by deleting the term “preliminary” and substituting instead the term “phased construction” so as amended the new paragraph shall read:

(3) All new construction and renovations to existing facilities other than alterations not affecting life safety functional issues, shall be performed in accordance with the specific requirements of these regulations governing new construction in HIV supportive living facilities, including the submission of phased construction plans and the final work drawings and the specifications to each.

Rule 1200-8-28-.08 Building Standards. Paragraph (4) is amended in the second sentence by deleting the term “one (1) complete set” and substituting instead the term “two (2) complete sets” so as amended the new rule shall read:

(4) No new HIV supportive living facility shall be constructed, nor shall major alterations be made to existing HIV supportive living facilities, without the prior written approval of the department. Before any new HIV supportive living facility is licensed or before any alteration or expansion of a HIV supportive living facility can be approved, the applicant must furnish two (2) complete sets of plans and specifications to the department, together with fees and other information as required. Plans and specifications for new construction and major renovations shall be prepared by or under the direction of a licensed architect or a qualified licensed engineer.

Rule 1200-8-28-.08 (7) Building Standards. Subparagraph (a) is amended by deleting the term “A plan” and substituting instead the term “Plans” so as amended the new rule shall read:

(a) Plans shall be forwarded to the appropriate section of the department for review. After receipt of approval of the plans, the owner may proceed with site grading and foundation work prior to receipt of approval of final plans and specifications with the understanding that such work is at the owner’s risk and without assurance that final approval of final plans and specifications shall be granted. Final plans and specifications shall be submitted for review and approval. Final approval must be received before proceeding beyond foundation work.

The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-18)

DEPARTMENT OF HEALTH - 1200
BOARD FOR LICENSING HEALTH CARE FACILITIES

There will be a hearing before the Tennessee Department of Health to consider the promulgation of rules pursuant to T.C.A. §§ 68-11-202 et seq., and 68-11-209. The hearing will be conducted in the manner prescribed by the Uniform Administration Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Sequoyah Room on the ground floor of the Cordell Hull Building located at 425 5th Avenue North, Nashville, Tennessee 37247-0508 at 9:30 a.m. C.T. on the 15th day of February, 2002.

Any individuals with disabilities who wish to participate in these proceedings should contact the Department of Health to discuss any auxiliary aids of services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date to allow time for the Department of Health to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Health’s ADA Coordinator at 425 5th Avenue North, Nashville, Tennessee, Telephone 615-741-7598.

For a copy of this notice of rulemaking hearing, contact: Steve Goodwin, 425 5th Avenue North, Nashville, Tennessee 37247-0508, Telephone 615-741-7598.

SUBSTANCE OF PROPOSED RULES

CHAPTER 1200-24-5
REVIEW OF HEALTH CARE FACILITY CONSTRUCTION PLANS AND SPECIFICATIONS

AMENDMENTS

Rule 1200-24-5.01 Definitions. Paragraph (7) is amended by deleting the paragraph in its entirety and substituting instead the following language so that as amended the rule shall read:


The notice of rulemaking set out herein was properly filed in the Department of State on the 19th day of December, 2001. (12-19
There will be a hearing before the Tennessee Board of Veterinary Medical Examiners to consider the promulgation of amendments to rules and new rules pursuant to T.C.A. §§ 4-5-202, 4-5-204, and 63-12-106. The hearing will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204 and will take place in the Johnson Room of the Cordell Hull Building located at 425 5th Avenue North, Nashville, TN at 2:30 p.m. (CST) on the 18th day of March, 2002.

Any individuals with disabilities who wish to participate in these proceedings (review these filings) should contact the Department of Health, Division of Health Related Boards to discuss any auxiliary aids or services needed to facilitate such participation or review. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date (the date such party intends to review such filings), to allow time for the Division to determine how it may reasonably provide such aid or service. Initial contact may be made with the ADA Coordinator at the Division of Health Related Boards, First Floor, Cordell Hull Building, 425 Fifth Avenue North, Nashville, TN 37247-1010, (615) 532-4397.

For a copy of the entire text of this notice of rulemaking hearing contact:

Jerry Kosten, Regulations Manager, Division of Health Related Boards, 425 Fifth Avenue North, First Floor, Cordell Hull Building, Nashville, TN 37247-1010, (615) 532-4397.

**SUBSTANCE OF PROPOSED RULES**

**AMENDMENTS**

Rule 1730-1-.12, Continuing Education, is amended by adding the following organizations to the list of organizations provided in part (3) (f) 1.:

American Dairy Science Association
American Society of Animal Scientists

*Authority:* T.C.A. §§4-5-202, 4-5-204, 63-12-106, 63-12-120, and 63-12-121.

Rule 1730-1-.13, Unprofessional Conduct, is amended by adding the following language as new paragraphs (13) and (14):

(13) Violation of the provisions of the Non-Livestock Animal Humane Death Act codified at T.C.A. §§ 44-17-301, et seq, while performing euthanasia in a public or private agency, animal shelter or other facility operated for the collection, care and/or euthanasia of stray, neglected, abandoned or unwanted non-livestock animals.

(14) Violation of the provisions of Rule 1730-1-.23.

*Authority:* T.C.A. §§4-5-202, 4-5-204, 44-17-301, *et seq.*, 63-12-106, 63-12-124, and 63-12-141.

Rule 1730-4-.07, Requirements for Inspection, is amended by deleting paragraph (3) in its entirety and substituting instead the following language, so that as amended, the new paragraph (3) shall read:
(3) If in compliance the Board will issue a compliance certificate which allows the entity to apply to the D.E.A. for a restricted controlled substance registration certificate. The D.E.A. certificate allows the C.A.C.A. to purchase, possess and use sodium pentobarbital to be administered by a C.A.E.T. employed by the entity.

**Authority:** *T.C.A. §§4-5-202, 4-5-204, 63-12-106, and 63-12-141.*

Rule 1730-4-.09, Recordkeeping, is amended by deleting subparagraph (1) (a) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (1) (a) shall read:

(1) (a) Every C.A.C.A. shall keep a written report of the animals euthanized. This record shall include pertinent medical data including dates, estimated age, breed, weight, sex, amount and type of euthanasia and/or pre-euthanasia solution administered, and description of verification of death.

**Authority:** *T.C.A. §§4-5-202, 4-5-204, 63-12-106, and 63-12-141.*

Rule 1730-4-.11, Unprofessional Conduct, is amended by adding the following language as new paragraphs (9) and (10):

(9) Violation of the provisions of the Non-livestock Animal Humane Death Act codified at *T.C.A. § 44-17-301, et seq.*

(10) Violation of Rule 1730-4-.13 and Rule 1730-5-.14 regarding the dispensing and distribution of pharmaceuticals.

**Authority:** *T.C.A. §§4-5-202, 4-5-204, 44-17-301, et seq., 63-12-106, 63-12-124, and 63-12-141.*

Rule 1730-4-.13, Dispensing, or Otherwise Distributing Pharmaceuticals, is amended by adding the following language as new paragraph (3):

(3) The only drugs approved by the Board for the euthanasia of animals by a licensed veterinarian, a licensed veterinary technician employed by and functioning under the direct supervision of a licensed veterinarian, or a certified animal euthanasia technician in a certified animal control agency shall be sodium pentobarbital and all commercially available F.D.A. approved euthanasia agents containing sodium pentobarbital.

**Authority:** *T.C.A. §§4-5-202, 4-5-204, 63-12-106, and 63-12-141.*

Rule 1730-5-.01, Definitions, is amended by deleting paragraph (8) in its entirety and substituting instead the following language, and is further amended by adding the following language as a new, appropriately numbered paragraph, so that as amended, the new paragraph (8) and the new, appropriately numbered paragraph shall read:

(8) Certified Animal Euthanasia Technician (C.A.E.T.) – A person employed by a certified animal control agency who is authorized by the Board of Veterinary Medical Examiners (BVME) to humanely euthanize animals by administering sodium pentobarbital and the drugs referred to in Rules 1730-4-.13 and Rule 1730-5-.14 which have been approved by the BVME for the euthanasia of animals in a certified animal control agency.

( ) Tennessee Veterinarian Medical Technician – For purposes of these rules, a veterinarian medical technician licensed by the Board of Veterinary Medical Examiners.

**Authority:** *T.C.A. §§4-5-202, 4-5-204, 63-12-106, and 63-12-141.*
Rule 1730-5-.02, Necessity of Certification, is amended by adding the following language as new paragraph (3):

(3) With regard to those individuals performing euthanasia in a public or private agency, animal shelter or other facility operated for the collection, care and/or euthanasia of stray, neglected, abandoned or unwanted non-livestock animals and who meet the following criteria, certification as a certified animal euthanasia technician is not required:

(a) If the individual passed a Board-approved euthanasia-technician certification course and performed euthanasia prior to July 1, 2001; and

(b) If the individual is an employee or agent of a public or private agency, animal shelter or other facility operated for the collection, care and/or euthanasia of stray, neglected, abandoned or unwanted non-livestock animals or is a Tennessee veterinarian medical technician

Authority: T.C.A. §§4-5-202, 4-5-204, 63-12-106, and 63-12-141.

Rule 1730-5-.11, Unprofessional Conduct, is amended by adding the following language as new paragraphs (6) and (7):

(6) Violation of the provisions of the Non-livestock Animal Humane Death Act codified at T.C.A. § 44-17-301, et seq.

(7) Violation of Rule 1730-4-.13 and Rule 1730-5-.14 regarding the dispensing and distribution of pharmaceuticals

Authority: T.C.A. §§4-5-202, 4-5-204, 44-17-301, et seq., 63-12-106, 63-12-124, and 63-12-141.

NEW RULES

TABLE OF CONTENTS

1730-1-.23 Euthanasia in C.A.C.A.s and Facilities Governed by the Non-Livestock Animal Humane Death Act (T.C.A. §§ 44-17-301, et seq.)

1730-5-.14 Dispensing, Or Otherwise Distributing Pharmaceuticals

1730-1-.23 EUTHANASIA IN C.A.C.A.s AND FACILITIES GOVERNED BY THE NON-LIVESTOCK ANIMAL HUMANE DEATH ACT (T.C.A. §§ 44-17-301, et seq.). The only drugs approved by the Board for the euthanasia of animals by a licensed veterinarian who performs euthanasia in a certified animal control agency or in a facility governed by the provisions of the Non-Livestock Animal Humane Death Act codified at T.C.A. §§ 44-17-301, et seq. shall be sodium pentobarbital and all commercially available F.D.A. approved euthanasia agents containing sodium pentobarbital.

Authority: T.C.A. §§4-5-202, 4-5-204, 44-17-301, et seq., 63-12-106, and 63-12-141.

1730-5-.14 DISPENSING, OR OTHERWISE DISTRIBUTING PHARMACEUTICALS.

(1) All Federal Regulations for the use of controlled substances must be followed including storage and recordkeeping.

(2) A record of all euthanasia solutions administered shall be kept.
(3) The only drugs approved by the Board for the euthanasia of animals by a licensed veterinarian, a licensed veterinary technician employed by and functioning under the direct supervision of a licensed veterinarian, or a certified animal euthanasia technician in a certified animal control agency shall be sodium pentobarbital and all commercially available F.D.A. approved euthanasia agents containing sodium pentobarbital.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-12-106, and 63-12-141.

The notice of rulemaking set out herein was properly filed in the Department of State on the 18th day of December, 2001. (12-06)
WILDLIFE PROCLAMATIONS

TENNESSEE WILDLIFE RESOURCES COMMISSION - 1660

PROCLAMATION 01-22
AMENDING PROCLAMATION 01-4
MANNER AND MEANS OF HUNTING, TAKING AND TRAPPING

Pursuant to the authority granted by Tennessee Code Annotated Sections 70-4-107 and 70-5-108, the Tennessee Wildlife Resources Commission hereby proclaims the following amendments to Proclamation 01-4, manner and means of hunting, taking and trapping:

Amend Section III. Legal Weapons, Sub-Section (1) Turkey Hunting, Part (b) by adding the following statement at the end:

“Requirements for the use of crossbows to hunt wild turkey by hunters with disabilities are the same as for hunting deer as listed in Section III. (2) Part (d) below.”

Proclamation No. 01-22 received and recorded this 21st day of December, 2001. (12-21)

TENNESSEE WILDLIFE RESOURCES COMMISSION - 1660

PROCLAMATION REGULATING SPRING WILD TURKEY HUNTING SEASONS AND BAG LIMITS

Pursuant to the authority granted by Tennessee Codes Annotated Sections 70-4-107 and 70-5-108, the Tennessee Wildlife Resources Commission hereby proclaims the following spring hunting seasons and bag limits for wild turkey hunting effective March 1, 2002.

SECTION I. GENERAL REGULATIONS

A. Prohibited Acts
Use of electronic calls or live decoy. Possession of agricultural grain on one’s person while turkey hunting. The use of any type of food to feed or attract wild turkeys on WMAs. Shooting or stalking turkeys from a boat in Shelby, Dyer, Tipton, Lauderdale, Haywood or Obion counties. Calling or attempting to call wild turkeys using any call to mimic the sounds made by a wild turkey is prohibited from March 1st to the opening day of the spring turkey hunt on all Wildlife Management Areas. A licensed turkey hunter who has filled his bag limit may accompany another turkey hunter (except on WMAs where prohibited) and assist him in calling, but may not have a gun or bow in his possession.

B. Bag and Possession Limits *

Statewide - One bearded turkey per day, not to exceed three per season, (Includes turkeys taken on WMAs listed in Section III. D. below)

Wildlife Management Areas (Except those WMAs listed in Section III. D)
One bearded turkey per hunt not to exceed two per season.

* The total bag and possession limit shall not exceed four bearded turkeys per season on the statewide season and WMAs combined. Turkeys taken on Ft. Campbell, Chickasaw NWR, Lower Hatchie NWR, Reelfoot NWR and youth-only hunts are bonus birds and do not count toward the total season bag and possession limit.

C. Shooting Hours - Thirty (30) minutes before sunrise to sunset

D. Checking Stations - All hunters must check in at the area checking station prior to hunting on AEDC, Anderson-Tully, Catoosa, Cheatham, Chuck Swan, Laurel Hill, LBL, Natchez Trace, Prentice Cooper, Reelfoot and Shelby Forest Wildlife Management Areas. Hunters are also required to check out at the conclusion of their hunt. All turkeys harvested on the statewide hunt or on WMAs must be taken by the most reasonably direct route to the nearest county or WMA check station on the day harvested. The permanent kill tag required for the legal possession will be issued at the checking station.

SECTION II. STATEWIDE TURKEY HUNTING SEASONS AND BAG LIMITS
(Exclusive of WMAs unless listed in Section III.D below)

A. Counties Open - All counties of the state are open

B. Statewide Turkey Season Dates – March 30 through May 7, 2002

C. Statewide Youth - Only Hunt (ages10 through 16) - May 11, 2002
Each youth must be accompanied by a non-hunting adult who is not required to have a license. Bag limit - one bearded bird

SECTION III. WILDLIFE MANAGEMENT AREAS - SEASONS AND MISCELLANEOUS REGULATIONS

A. Regular Managed Hunts (No Quota) Bag Limit - One bearded turkey per hunt not to exceed two turkeys per spring season. (See Section I.B.)
AEDC

Four hunts: March 30-April 1, 12-14, 19-21, 26-28.

Anderson-Tully

Three 2-day hunts April 13-14, 20-21, 27-28
One 1-day Youth-only hunt: May 11

Catoosa

Six 3-day hunts: April 5-7, 12-14, 16-18, 23-25, 26-28, April 30-May 2.
One 2-day Youth-only hunt April 20-21

Cheatham

Four hunts: March 30-April 1, 13-16, 18-21, 26-28.
One 1-day Youth-only hunt: April 6.

Ernest Rice

One 1-day Youth-only hunt: May 11.

Fall Creek Falls

Two hunts: April 6-10, 11-14 (Archery Only).

Laurel Hill

Four hunts: March 30-April 1, 5-7, 13-16, 18-21.

LBL

Two 7-day hunts: April 15-21 and April 22-28
Hunters harvesting a turkey on a LBL quota hunt (Sect. III.B) may not hunt on the April 15-21 hunt.

Natchez Trace

One 2-day hunt: May 2-3.

Moss Island

One 1-day Youth-only hunt: May 11.

Prentice Cooper

Six 3-day hunts: April 2-4, 5-7, 9-11, 18-20, 23-25, 26-28.

Shelby Forest

One 1-day Youth-only hunt: May 11.

Williamsport

Two 3-day hunts: March 30-April 1, 19-21.

Wolf River

One 1-day Youth-only hunt: May 11.

B. Quota Managed Hunts (Quota turkey permit required) Bag Limit-One bearded turkey per hunt not to exceed two per spring season (See Sect. I.B.)

Chuck Swan

Six 3-day hunts: March 28-30, April 4-6, 11-13, 18-20, 25-27 May 2-4. (125 hunter quota per hunt). Hunting ends at noon each day, hunters must be at check station by 1pm

Ernest Rice

One 2-day hunt: April 20-21. (30 hunter quota)

LBL

Two 2-day hunts: April 9-10, 13-14 (350 quota per hunt)
One 2-day Youth-only hunt: April 6-7 (300 hunter quota)

Moss Island

One 2-day hunt: April 20-21. (30 hunter quota)

Natchez Trace

Three 3-day hunts: April 5-7, 19-21, 26-28. 96 hunter quota per hunt (48 south of I-40 only and 48 north of I-40 only). Hunters must sign in and out each day they hunt.
Tennessa administrative register

Oak Ridge  Two 2-day hunts: April 6-7, 13-14
(100 hunter quota per hunt). Hunting ends at 2 p.m. daily, successful
hunters must be at check station by 3 p.m.
Scouting date for permit holders only March 24th 6am to 2 pm
Hunts subject to cancellation for National security.
Hunting area may be reduced.

Reelfoot WMA and  One 3-day hunt: April 12-14 (20 Hunter quota)
Black Bayou Refuge

Shelby Forest  Three 1-day hunts: April 13, 20, 27 (50 hunter quota each)

Wolf River  Two 3-day hunts: April 5-7 (20 hunter quota) and
April 19-21 (25 hunter quota).
Hunting ends at noon each day and successful hunters must check
birds at Wolf River Check Station by 1pm

Yuchi Refuge  Five three-day hunts: April 5-7, 12-14, 19-21, 23-25,
(at Smith Bend) April 30-May 2 (10 hunter quota per hunt). Hunting ends at Noon EST.
Walk-in Only. No Access by Boat.

C. Special Managed Hunts (No Quota)

South Cherokee* March 30 - May 7  (Non-quota permit required)
and Foothills  Bag limit - one bearded turkey per day not to exceed 2 per season.
Turkey counts in WMA bag limit.

May 11, 2002 - Youth-only (age 10 through 16) hunt to
Coincide with the statewide youth hunt. Bag limit is one bearded bird
and counts as a statewide bird.

*South Cherokee – portions of Cherokee Forest WMA south of Great Smoky Mtns. National Park

D. Wildlife Management Areas Open With Statewide Seasons and Bag Limits:

Alpine Mtn., Barkley (Units I and II), Bean Switch Refuge, Big Sandy, (including Gin Creek), Bridgestone/Firestone,
Camden (Units I and II), Cedar Hill Swamp, Chickamauga, Chickasaw, Cheatham Lake, Cold Creek Refuge, Cordell
Hull, Cordell Hull Refuge, Cove Creek, Cumberland Springs, Cypress Pond Refuge, Doe Mtn, Duck River, Eagle
Creek, Edgar Evins State Park, Flintville Hatchery, Gooch, Harmon’s Creek, Haynes Bottom, Hop-in Refuge, Horns
Bluff Refuge, Jarrell Switch, Jackson Swamp, Keyes-Harrison, Lick Creek, Lick Creek Bottoms, Maness Swamp
Refuge, MTSU, Mt. Roosevelt, New Hope, Normandy, Obion River, Old Hickory (including Lock 5 Refuge), Pea
Ridge, Percy Priest Unit II, Pickett, Royal Blue, Standing Stone, West Sandy, Tellico Lake (except McGhee-Carson
and Niles Ferry Units), Tigrrett, Watts Bar, White Lake Refuge, White Oak and portions of the Cherokee Forest
WMA north of the Great Smoky Mtns. National Park are open to coincide with the statewide seasons and bag limits.
SECTION IV. NATIONAL WILDLIFE REFUGE HUNTS - FEDERAL PERMIT REQUIRED  Bag Limit – One bearded turkey per season (counts as a bonus bird unless otherwise noted).

<table>
<thead>
<tr>
<th>National Wildlife Refuge</th>
<th>Details</th>
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<tbody>
<tr>
<td>Chickasaw NWR</td>
<td>Two 2-day hunts: April 6-7, 20-21 (25 hunter quota)</td>
</tr>
<tr>
<td>Lower Hatchie NWR</td>
<td>Two 2-day hunts: April 6-7, 20-21 (15 hunter quota)</td>
</tr>
<tr>
<td>Upper Hatchie NWR</td>
<td>One 17-day hunt: April 12-28 (Counts in statewide bag)</td>
</tr>
<tr>
<td>Tennessee NWR and</td>
<td>March 30 - May 7. (counts in statewide bag)</td>
</tr>
<tr>
<td>Cross Creeks NWR</td>
<td>May 11th - a Youth-only (age 10 through 16) hunt to coincide with the statewide youth hunt and bag limit.</td>
</tr>
<tr>
<td>Reelfoot NWR</td>
<td>One three-day hunt April 12-14.</td>
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<td></td>
<td>Hunter quota: Grassy Lake - 25, Long Point - 25.</td>
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</tbody>
</table>

SECTION IV. REPEAL OF PRIOR PROCLAMATIONS

This proclamation repeals Proclamation 00-23 dated Oct. 25, 2000.

Proclamation No. 01-24 received and recorded this 21st day of December, 2001. (12-22)
CERTIFICATE OF APPROVAL

As provided by T.C.A., Title 4, Chapter 5, I hereby certify that to the best of my knowledge, this issue of the Tennessee Administrative Register contains all documents required to be published that were filed with the Department of State in the period beginning December 3, 2001 and ending December 31, 2001.

RILEY C. DARNELL
Secretary of State
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