



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
 Nellie M. Gorbea, *Secretary of State*

**Rules and Regulations Filing Form**

**1. Agency Name and Address**

Health, Department of  
 Cannon Building

**2. Title of Rule**

Rules and Regulations Pertaining to the Fee Structure for Licensing, Laboratory and Administrative Services Provided by the Department of Health [R23-1-17-Fee]

**3. Statutory Source of Authority**

RIGL Chapter 23-1-17

**4. Concise Explanatory Statement - §42-35-2.6**

These amendments consolidate two separate rulemaking actions pertaining to these Regulations which adjust the academic faculty license fee for consistency with the physician license fee, add fees associated with the licensing of applied behavior analysts, and eliminate licensing fees associated with repealed regulations.

**5. Type of Filing**

Emergency Rules	
A1. Emergency 120-day initial - §42-35-2.10 <input type="checkbox"/> Adoption <input type="checkbox"/> Amendment of ERLID: <input type="checkbox"/> Repeal of ERLID:	A2. Emergency 60-day renewal - §42-35-2.10 <input type="checkbox"/> Adoption <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal Indicate ERLID of 120-day initial:
Brief Statement of Reason for Finding Imminent Peril §42-35-2.10:	

Final Rules		
<input checked="" type="checkbox"/> B1. Amendment - §42-35-3(a) <input type="checkbox"/> C. Technical Revision	<input type="checkbox"/> B2. Adoption - §42-35-3(a) <input type="checkbox"/> D. Direct Final Rule - §42-35-2.11	<input type="checkbox"/> B3. Repeal - §42-35-3(a)
Supersedes ERLID: 8068 If B1 or C, please indicate new, amended, deleted, or revised sections:		

**6. Notice and Hearing Information**

Date of Public Notice - §42-35-2.8:07/17/2015  
 Date of Public Hearing - §42-35-2.8:09/10/2015  
 End of Comment Period - §42-35-2.8 :09/10/2015

**7. Agency Additional Information - Web Page**

http://

**8. Certification**

*I hereby certify that the attached rules and regulations were adopted in accordance with the Administrative Procedures Act (42-35) and that they are true copies of this Department, attest,*

\_\_\_\_\_  
 Name  
  
 \_\_\_\_\_  
 Title

\_\_\_\_\_  
 Notary Public  
 Subscribed and sworn before me  
 this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_