

NOTICE PUBLICATION/REGULATIONS SUBMISSION

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER	REGULATORY ACTION NUMBER	EMERGENCY NUMBER
	Z-2016-0315-11	2017-0322-055	

For use by Office of Administrative Law (OAL) only

RECEIVED DATE MAR 15 '16	PUBLICATION DATE MAR 25 '16	2017 MAR 22 P 2: 57 OFFICE OF ADMINISTRATIVE LAW
Office of Administrative Law NOTICE		REGULATIONS

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

MAY 04 2017
1:30 PM

AGENCY WITH RULEMAKING AUTHORITY California Board of Occupational Therapy	AGENCY FILE NUMBER (if any)
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A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE Fees	TITLE(S) 16	FIRST SECTION AFFECTED 4130	2. REQUESTED PUBLICATION DATE March 25, 2016
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Jeff Hanson	TELEPHONE NUMBER (916) 263-2092	FAX NUMBER (Optional) (916) 263-2701
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	ACTION ON PROPOSED NOTICE	NOTICE REGISTER NUMBER 2016-13-2	PUBLICATION DATE 3/25/2016

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Fees	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)
ADOPT
AMEND 4130
REPEAL
TITLE(S) 16

3. TYPE OF FILING			
<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346) <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute. <input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h)) <input type="checkbox"/> File & Print <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100) <input type="checkbox"/> Print Only

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)

7/6/2016 - 7/22/2016 ; 8/3/2016 - 8/18/2016 request No. 51117

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)
<input checked="" type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) <input type="checkbox"/> Effective on filing with Secretary of State <input type="checkbox"/> \$100 Changes Without Regulatory Effect <input type="checkbox"/> Effective other (Specify) _____

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY
<input checked="" type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660) <input type="checkbox"/> Fair Political Practices Commission <input type="checkbox"/> State Fire Marshal <input checked="" type="checkbox"/> Other (Specify) JEFFREY MASON, Chief Deputy, Director, Department of Consumer Affairs

7. CONTACT PERSON Heather Martin	TELEPHONE NUMBER (916) 263-2294	FAX NUMBER (Optional) (916) 263-2701	E-MAIL ADDRESS (Optional) heather.martin@dca.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE 	DATE 20 March 2017
TYPED NAME AND TITLE OF SIGNATORY Heather Martin, Executive Officer, California Board of Occupational Therapy	

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED
MAY 04 2017
Office of Administrative Law

CALIFORNIA BOARD OF OCCUPATIONAL THERAPY
Title 16, Division 39, California Code of Regulations

Order of Adoption

The title of Article 4 is added to read as follows:

Article 4. Fees

[Section 4130 is being moved from Article 3.5 to Article 4]

§ 4130. Fees

Fees are fixed by the board as follows:

- (a) ~~On or after July 1, 2014, t~~ The fee for processing an Initial Application for Licensure (Form ILA, Revised 8/2012 7/2016) shall be fifty dollars (\$50).
- (b) The initial license fee for occupational therapists shall be prorated pursuant to Section 4120(a)(1) and based on a the biennial renewal fee of one hundred fifty dollars (\$150) set forth below.
- (c) The initial license fee for occupational therapy assistants shall be prorated pursuant to Section 4120(a)(1) and based on a the biennial renewal fee set forth below.
- ~~(e) (d)~~ The fee for a limited permit shall be ~~seventy five dollars (\$75)~~ one hundred dollars (\$100).
- ~~(d)~~ (e) The biennial renewal fee for occupational therapists shall be ~~one hundred fifty dollars (\$150)~~ two hundred twenty dollars (\$220). For licenses that expire on or after January 1, 2021, the biennial renewal fee shall be two hundred seventy dollars (\$270).
- (f) The biennial renewal fee for occupational therapy assistants shall be one hundred eighty dollars (\$180). For licenses that expire on or after January 1, 2021, the biennial renewal fee shall be two hundred ten dollars (\$210).
- ~~(e) (g)~~ The delinquency fee is one-half of the renewal fee.
- ~~(f) (h)~~ The renewal fee for an inactive license shall be ~~twenty five dollars (\$25)~~. The biennial renewal fee for an inactive license shall be the same as the biennial renewal fee for an active license.
- ~~(g) (i)~~ On or after July 1, 2013, t The fee for an Application for Retired Status (Form ARS, New 7/2012), shall be twenty-five dollars (\$25).
- ~~(h) (j)~~ The fee for a duplicate license shall be ~~fifteen dollars \$15~~ twenty five dollars (\$25).
- ~~(i) (k)~~ The fees for fingerprint services are those charged by the California Department of Justice and the Federal Bureau of Investigation.

Note: Authority cited: Sections 122, 144, 163.5, and 2570.20, Business and Professions Code.

Reference: Sections 134, 144, 161, 462, 703, 2570.5, 2570.9, 2570.10, 2570.11, and 2570.16, and 2570.17, Business and Professions Code.