WEST VIRGINIA
SECRETARY OF STATE
NATALIE E. TENNANT
ADMINISTRATIVE LAW DIVISION

Form #4

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OFFICE OF
SECRETARY OF STATE

NOTICE OF RULE MODIFICATION OF A PROPOSED RULE

AGENCY: West Virginia Board of Optometey TITLE NUMBER: 14

CITE AUTHORITY: 30-8-1, et. al.

AMENDMENT TO AN EXISTING RULE: YES X NO ____

IF YES, SERIES NUMBER OF RULE BEING AMENDED: 14-5

TITLE OF RULE BEING AMENDED: Schedule of Fees

IF NO, SERIES NUMBER OF RULE BEING PROPOSED: ____

TITLE OF RULE BEING PROPOSED: ____

THE ABOVE PROPOSED LEGISLATIVE RULES, FOLLOWING REVIEW BY THE LEGISLATIVE RULE MAKING REVIEW COMMITTEE, IS HEREBY MODIFIED AS A RESULT OF REVIEW AND COMMENT BY THE LEGISLATIVE RULE MAKING REVIEW COMMITTEE. THE ATTACHED MODIFICATIONS ARE FILED WITH THE SECRETARY OF STATE.

James Campbell
Authorized Signature

TITLE 14
WEST VIRGINIA BOARD OF OPTOMETRY

SERIES 5
SCHEDULE OF FEES

§14-5-1. General.

1.1. Scope. -- This schedule establishes the fees to be charged by the Board for services rendered.

1.2. Authority. -- W. Va. Code §30-8-1, et. seq.

1.3. Filing Date.

1.4. Effective Date. --

§14-5-2. Schedule of Fees.

2.1. Application Fee.....$300.00

2.2. Reciprocity Application Fee.....$300.00

2.3. Active License Restoration Fee.....$400.00

2.4. Temporary Permit.....$300.00

2.5. Oral Pharmaceutical Certificate.....$200.00

2.6. Contact Lenses That Deliver Pharmaceuticals Certificate.....$50.00

2.7. Pharmaceuticals By Injection Certificate.....$200.00

2.8. Expanded Therapeutic Procedures Certificate.....$200.00

~~2.8~~ 2.9. License Card and Certificate.....$100.00

~~2.9~~2.10.Duplicate License Card.....$15.00

~~2.10~~2.11.Duplicate Certificate.....$25.00

~~2.11~~2.12.Annual Renewal Fee.....$400.00

~~2.12~~2.13.Late Renewal Fee.....$200.00

~~2.13~~2.14.Continuing Education Provider Fee.....$50.00

~~2.14~~2.15.Confirmation of Licensure.....$25.00

~~2.15~~2.16.Business Entity Verification Fee.....$25.00

~~2.16~~2.17. Roster of WV Optometrists Electronic or Hard Copy.....$200.00

~~2.17~~2.18. Rules and Practice Act.....$25.00

~~2.18~~2.19. Written Change of Name.....$10.00

~~2.19~~2.20. Written Change of Address.....$10.00

~~2.20~~2.21. Copies of Public Records (Per page).....$.50

~~2.21~~2.22. Fees are payable to the West Virginia Board of Optometry by check, money order, certified check, ~~or~~ credit card or ACH debit.