THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2020 Medical Lab Sciences(Bachelor) (Fees shown are for One Semester Only)

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Other Dedicated Fees | Technology Fee | Micro-scope Fee | Malpractice Insurance Fall Only | In-State Total | Out-of- State Tuition Difference | *Out-of- State Total |
|-------|--------------------|------------------------|-----------------------|----------------------------|-------------------|--------------------|---------------------------------------|----------------|---|-------------------------|
| 1 | 333 | 45 | 12 | 3 | 12 | 52.50 | 20 | 477.50 | 167 | 644.50 |
| 2 | 666 | 90 | 24 | 6 | 24 | 52.50 | 20 | 882.50 | 334 | 1216.50 |
| 3 | 999 | 135 | 36 | 9 | 36 | 52.50 | 20 | 1287.50 | 501 | 1788.50 |
| 4 | 1332 | 180 | 48 | 12 | 48 | 52.50 | 20 | 1692.50 | 668 | 2360.50 |
| 5 | 1665 | 225 | 60 | 15 | 60 | 52.50 | 20 | 2097.50 | 835 | 2932.50 |
| 6 | 1998 | 270 | 72 | 18 | 72 | 52.50 | 20 | 2502.50 | 1002 | 3504.50 |
| 7 | 2331 | 315 | 84 | 21 | 84 | 52.50 | 20 | 2907.50 | 1169 | 4076.50 |
| 8 | 2664 | 360 | 96 | 24 | 96 | 52.50 | 20 | 3312.50 | 1336 | 4648.50 |
| 9 | 2997 | 400 | 100 | 25 | 120 | 52.50 | 20 | 3714.50 | 1503 | 5217.50 |
| 10 | 3330 | 400 | 100 | 25 | 120 | 52.50 | 20 | 4047.50 | 1670 | 5717.50 |
| 11 | 3663 | 400 | 100 | 25 | 120 | 52.50 | 20 | 4380.50 | 1837 | 6217.50 |
| 12+ | 3995 | 400 | 100 | 25 | 120 | 52.50 | 20 | 4712.50 | 2005 | 6717.50 |

**Clinical Lab Sciences-MS

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Other Dedicated Fees | Technology Fee | In-State Total | Out-of- State Tuition Difference | *Out-of-State Total |
|-------|--------------------|------------------------|-----------------------|----------------------------|-------------------|-------------------|---|------------------------|
| 1 | 560 | 45 | 12 | 3 | 14 | 634 | 241 | 875 |
| 2 | 1120 | 90 | 24 | 6 | 28 | 1268 | 482 | 1750 |
| 3 | 1680 | 135 | 36 | 9 | 42 | 1902 | 723 | 2625 |
| 4 | 2240 | 180 | 48 | 12 | 56 | 2536 | 964 | 3500 |
| 5 | 2800 | 225 | 60 | 15 | 70 | 3170 | 1205 | 4375 |
| 6 | 3360 | 270 | 72 | 18 | 84 | 3804 | 1446 | 5250 |
| 7 | 3920 | 315 | 84 | 21 | 98 | 4438 | 1687 | 6125 |
| 8 | 4480 | 360 | 96 | 24 | 112 | 5072 | 1928 | 7000 |
| 9+ | 5034 | 400 | 100 | 25 | 120 | 5679 | 2166 | 7845 |

^{*}Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

^{**}The Clinical Lab Sciences students are charged a \$20.00 fee for malpractice insurance for Fall Semester.

Entry Level Advanced Degree-Physical Therapy-Doctorate, Master's of Occupational Therapy

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Other Dedicated Fees | Technology Fee | Malpractice Insurance Fall Only | In-State Total | Out-of-State Tuition Difference | *Out-of- State Total |
|-------|--------------------|------------------------|-----------------------|----------------------------|-------------------|---------------------------------------|-------------------|---------------------------------------|----------------------------|
| 1 | 768 | 45 | 12 | 3 | 14 | 20 | 862 | 1000 | 1862 |
| 2 | 1536 | 90 | 24 | 6 | 28 | 20 | 1704 | 2000 | 3704 |
| 3 | 2304 | 135 | 36 | 9 | 42 | 20 | 2546 | 3000 | 5546 |
| 4 | 3072 | 180 | 48 | 12 | 56 | 20 | 3388 | 4000 | 7388 |
| 5 | 3840 | 225 | 60 | 15 | 70 | 20 | 4230 | 5000 | 9230 |
| 6 | 4608 | 270 | 72 | 18 | 84 | 20 | 5072 | 6000 | 11072 |
| 7 | 5376 | 315 | 84 | 21 | 98 | 20 | 5914 | 7000 | 12914 |
| 8 | 6144 | 360 | 96 | 24 | 112 | 20 | 6756 | 8000 | 14756 |
| 9+ | 6907 | 400 | 100 | 25 | 120 | 20 | 7572 | 8991 | 16563 |

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

^{*}Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

^{**}MOT students charged Media fee \$150 Fall Semester only

^{**}MOT students charged Board Review Fee \$75 per semester

ON LINE PROGRAMS:

Health Informatics & Information Management Masters and Certificate (On Line) Bachelor of Science Health Informatics & Information Management (On Line)

| | | | | Out-ot- | |
|-------|-------------|---------|----------|------------|-------------|
| | Maintenance | On Line | In-State | State | *Out-of- |
| | Fee | Support | Total | Tuition | State Total |
| Hours | | | | Difference | |
| 1 | 500 | 50 | 550 | 50 | 600 |
| 2 | 1000 | 100 | 1100 | 100 | 1200 |
| 3 | 1500 | 150 | 1650 | 150 | 1800 |
| 4 | 2000 | 200 | 2200 | 200 | 2400 |
| 5 | 2500 | 250 | 2750 | 250 | 3000 |
| 6 | 3000 | 300 | 3300 | 300 | 3600 |
| 7 | 3500 | 350 | 3850 | 350 | 4200 |
| 8 | 4000 | 400 | 4400 | 400 | 4800 |
| 9 | 4500 | 450 | 4950 | 450 | 5400 |
| 10 | 5000 | 500 | 5500 | 500 | 6000 |
| 11 | 5500 | 550 | 6050 | 550 | 6600 |
| 12 | 6000 | 600 | 6600 | 600 | 7200 |
| 13 | 6500 | 650 | 7150 | 650 | 7800 |
| 14 | 7000 | 700 | 7700 | 700 | 8400 |
| 15 | 7500 | 750 | 8250 | 750 | 9000 |
| | | | | | |

Online program fees are charged per credit hour with no maximum credit hour cap.

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

^{*}Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

Bachelor of Medical Lab Science (On Line)

| Hours | Maintenance Fee | On Line Support | Malpractice Insurance Fall Only | In-State Total | Out-of-State Tuition Difference | *Out-of- State Total |
|-------|--------------------|--------------------|---------------------------------------|-------------------|---------------------------------------|-------------------------|
| 1 | 350 | 46 | 20 | 416 | 65 | 481 |
| 2 | 700 | 92 | 20 | 812 | 130 | 942 |
| 3 | 1050 | 138 | 20 | 1208 | 195 | 1403 |
| 4 | 1400 | 184 | 20 | 1604 | 260 | 1864 |
| 5 | 1750 | 230 | 20 | 2000 | 325 | 2325 |
| 6 | 2100 | 276 | 20 | 2396 | 390 | 2786 |
| 7 | 2450 | 322 | 20 | 2792 | 455 | 3247 |
| 8 | 2800 | 368 | 20 | 3188 | 520 | 3708 |
| 9 | 3150 | 414 | 20 | 3584 | 585 | 4169 |
| 10 | 3500 | 460 | 20 | 3980 | 650 | 4630 |
| 11 | 3850 | 506 | 20 | 4376 | 715 | 5091 |
| 12 | 4200 | 552 | 20 | 4772 | 780 | 5552 |
| 13 | 4550 | 598 | 20 | 5168 | 845 | 6013 |
| 14 | 4900 | 644 | 20 | 5564 | 910 | 6474 |
| 15 | 5250 | 690 | 20 | 5960 | 975 | 6935 |
| | | | | | | |

Online program fees are charged per credit hour with no maximum credit hour cap.

Entry Level Advanced Degree: Master of Cytopathology

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Other Dedicated Fees | Technology Fee | Microscope Fee Fall Only | Malpractice Insurance Fall Only | In-State Total | Out-of- State Tuition Difference | *Out-of- State Total |
|-------|--------------------|------------------------|-----------------------|----------------------------|-------------------|-----------------------------|---------------------------------------|----------------|---|-------------------------|
| 1 | 551 | 45 | 12 | 3 | 14 | 52.50 | 20 | 697.50 | 251 | 948.50 |
| 2 | 1102 | 90 | 24 | 6 | 28 | 52.50 | 20 | 1322.50 | 502 | 1824.50 |
| 3 | 1653 | 135 | 36 | 9 | 42 | 52.50 | 20 | 1947.50 | 753 | 2700.50 |
| 4 | 2204 | 180 | 48 | 12 | 56 | 52.50 | 20 | 2572.50 | 1004 | 3576.50 |
| 5 | 2755 | 225 | 60 | 15 | 70 | 52.50 | 20 | 3197.50 | 1255 | 4452.50 |
| 6 | 3306 | 270 | 72 | 18 | 84 | 52.50 | 20 | 3822.50 | 1506 | 5328.50 |
| 7 | 3857 | 315 | 84 | 21 | 98 | 52.50 | 20 | 4447.50 | 1757 | 6204.50 |
| 8 | 4408 | 360 | 96 | 24 | 112 | 52.50 | 20 | 5072.50 | 2008 | 7080.50 |
| 9+ | 4950 | 400 | 100 | 25 | 120 | 52.50 | 20 | 5667.50 | 2250 | 7917.50 |

^{*}Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2020

The minimum charge is equivalent to one hour at the semester hour rate.

(Fees shown are for One Semester Only)

Master of Science Speech-Language Pathology

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Other Dedicated Fees | Technology Fee | In-State Facility Fee | Transporta- tion Fee | Malpractice Insurance Fall Only | Library Fee | In-State Total | Out-of- State Facility | Out-of-State Tuition Difference | *Out- of- State Total |
|-------|--------------------|---------------------------|-----------------------|----------------------------|-------------------|--------------------------|-------------------------|---------------------------------------|----------------|-------------------|------------------------------|---------------------------------------|--------------------------------|
| 1 | 698 | 47 | | 3 | 14 | 23 | 6 | 20 | 5 | 816 | 36 | 911 | 1740 |
| 2 | 1396 | 94 | | 6 | 28 | 46 | 12 | 20 | 10 | 1612 | 72 | 1822 | 3460 |
| 3 | 2094 | 141 | | 9 | 42 | 69 | 18 | 20 | 15 | 2408 | 108 | 2733 | 5180 |
| 4 | 2792 | 188 | | 12 | 56 | 92 | 24 | 20 | 20 | 3204 | 144 | 3644 | 6900 |
| 5 | 3490 | 235 | | 15 | 70 | 115 | 30 | 20 | 25 | 4000 | 180 | 4555 | 8620 |
| 6 | 4188 | 282 | | 18 | 84 | 138 | 36 | 20 | 30 | 4796 | 216 | 5466 | 10340 |
| 7 | 4886 | 329 | | 21 | 98 | 161 | 42 | 20 | 35 | 5592 | 252 | 6377 | 12060 |
| 8 | 5584 | 376 | | 24 | 112 | 184 | 48 | 20 | 40 | 6388 | 288 | 7288 | 13780 |
| 9+ | 6273 | 418 | 101 | 25 | 120 | 202 | 75 | 20 | 40 | 7274 | 317 | 8192 | 15581 |

Master, Doctor and Transitional Doctor of Audiology

| Hours | Maintenance Fee | Program & Services Fee Se | Health ervice Fee | Other Dedicated Fees | Technology Fee | In-State Facility Fee | Transporta- tion Fee | Malprac-tice Insurance Fall Only | Library Fee | In-State Total | Out-of- State Facility | Out-of- State Tuition Difference | *Out- of- State Total |
|-------|--------------------|---------------------------|----------------------|----------------------------|-------------------|--------------------------|-------------------------|--|----------------|-------------------|------------------------------|---|--------------------------------|
| 1 | 698 | 47 | | 3 | 14 | 23 | 6 | 20 | 5 | 788 | 36 | 911 | 1712 |
| 2 | 1396 | 94 | | 6 | 28 | 46 | 12 | 20 | 10 | 1612 | 72 | 1822 | 3460 |
| 3 | 2094 | 141 | | 9 | 42 | 69 | 18 | 20 | 15 | 2408 | 108 | 2733 | 5180 |
| 4 | 2792 | 188 | | 12 | 56 | 92 | 24 | 20 | 20 | 3204 | 144 | 3644 | 6900 |
| 5 | 3490 | 235 | | 15 | 70 | 115 | 30 | 20 | 25 | 4000 | 180 | 4555 | 8620 |
| 6 | 4188 | 282 | | 18 | 84 | 138 | 36 | 20 | 30 | 4796 | 216 | 5466 | 10340 |
| 7 | 4886 | 329 | | 21 | 98 | 161 | 42 | 20 | 35 | 5592 | 252 | 6377 | 12060 |
| 8 | 5584 | 376 | | 24 | 112 | 184 | 48 | 20 | 40 | 6388 | 288 | 7288 | 13780 |
| 9 | 6273 | 418 | 101 | 25 | 120 | 202 | 75 | 20 | 40 | 7274 | 317 | 8192 | 15581 |

^{*}Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

The minimum charge is equivalent to one hour at the semester hour rate.

Bachelor of Science of Audiology & Speech Pathology

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Other Dedicated Fees | Technology Fee | In-State Facility Fee | Transporta- tion Fee | Library Fee | In-State Total | Out-of-State Facility | Out-of- State Tuition Difference | *Out-of- State Total |
|-------|--------------------|---------------------------|-----------------------|----------------------------|-------------------|--------------------------|-------------------------|----------------|-------------------|--------------------------|---|-------------------------|
| 1 | 463 | 47 | | 3 | 14 | 23 | 6 | 5 | 561 | 36 | 759 | 1333 |
| 2 | 926 | 94 | | 6 | 28 | 46 | 12 | 10 | 1122 | 72 | 1518 | 2666 |
| 3 | 1389 | 141 | | 9 | 42 | 69 | 18 | 15 | 1683 | 108 | 2277 | 3999 |
| 4 | 1852 | 188 | | 12 | 56 | 92 | 24 | 20 | 2244 | 144 | 3036 | 5332 |
| 5 | 2315 | 235 | | 15 | 70 | 115 | 30 | 25 | 2805 | 180 | 3795 | 6665 |
| 6 | 2778 | 282 | | 18 | 84 | 138 | 36 | 30 | 3366 | 216 | 4554 | 7998 |
| 7 | 3241 | 329 | | 21 | 98 | 161 | 42 | 35 | 3927 | 252 | 5313 | 9331 |
| 8 | 3704 | 376 | | 24 | 112 | 184 | 48 | 40 | 4488 | 288 | 6072 | 10664 |
| 9 | 4167 | 418 | 101 | 25 | 120 | 202 | 75 | 40 | 5148 | 317 | 6831 | 12094 |
| 10 | 4630 | 418 | 101 | 25 | 120 | 202 | 75 | 40 | 5611 | 317 | 7590 | 13316 |
| 11 | 5093 | 418 | 101 | 25 | 120 | 202 | 75 | 40 | 6074 | 317 | 8349 | 14538 |
| 12 | 5555 | 418 | 101 | 25 | 120 | 202 | 75 | 40 | 6536 | 317 | 9095 | 15746 |

^{*}Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

The minimum charge is equivalent to one hour at the semester hour rate.

Post-Professional Degrees: Physical Therapy, MS, Transitional Doctor of Physical Therapy, Doctor of Science in Physical Therapy

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Other Dedicated Fees | Technology Fee | In-State Total | Out-of- State Tuition Difference | *Out-of-State Total |
|-------|--------------------|------------------------|-----------------------|----------------------------|-------------------|-------------------|---|------------------------|
| 1 | 560 | 45 | 12 | 3 | 14 | 634 | 997 | 1631 |
| 2 | 1120 | 90 | 24 | 6 | 28 | 1268 | 1994 | 3262 |
| 3 | 1680 | 135 | 36 | 9 | 42 | 1902 | 2991 | 4893 |
| 4 | 2240 | 180 | 48 | 12 | 56 | 2536 | 3988 | 6524 |
| 5 | 2800 | 225 | 60 | 15 | 70 | 3170 | 4985 | 8155 |
| 6 | 3360 | 270 | 72 | 18 | 84 | 3804 | 5982 | 9786 |
| 7 | 3920 | 315 | 84 | 21 | 98 | 4438 | 6979 | 11417 |
| 8 | 4480 | 360 | 96 | 24 | 112 | 5072 | 7976 | 13048 |
| 9+ | 5034 | 400 | 100 | 25 | 120 | 5679 | 8970 | 14649 |

UNIVERSITY FEES ARE DETERMINED BY THE BOARD OF TRUSTEES AND ARE SUBJECT TO CHANGE WITHOUT NOTICE

Non-Degree Health Professions (Undergraduate)

| Hours | Maintenance Fee | Program & Services Fee | Techno-logy Fee | In-State Total | Out-of-State Tuition Difference | *Out-of- State Total |
|-------|--------------------|------------------------|--------------------|-------------------|---------------------------------------|-------------------------|
| 1 | 333 | 45 | 14 | 392 | 757 | 1149 |
| 2 | 666 | 90 | 28 | 784 | 1514 | 2298 |
| 3 | 999 | 135 | 42 | 1176 | 2271 | 3447 |
| 4 | 1332 | 180 | 56 | 1568 | 3028 | 4596 |
| 5 | 1665 | 225 | 70 | 1960 | 3785 | 5745 |
| 6 | 1998 | 270 | 84 | 2352 | 4542 | 6894 |
| 7 | 2331 | 315 | 98 | 2744 | 5299 | 8043 |
| 8 | 2664 | 360 | 112 | 3136 | 6056 | 9192 |
| 9 | 2997 | 400 | 120 | 3517 | 6813 | 10330 |
| 10 | 3330 | 400 | 120 | 3850 | 7570 | 11420 |
| 11 | 3663 | 400 | 120 | 4183 | 8327 | 12510 |
| 12+ | 3995 | 400 | 120 | 4515 | 2005 | 6520 |
| | | | | | | |

Non-Degree Health Professions (Graduate)

| Hours | Maintenance Fee | Program & Services Fee | Health Service Fee | Techno- logy Fee | In-State Facility Fee | Transporta- tion Fee | Library Fee | In-State Total | Out-of- State Facility | Out-of-State Tuition Difference | *Out-of- State Total |
|-------|--------------------|------------------------|-----------------------|---------------------|--------------------------|-------------------------|----------------|----------------|------------------------------|---------------------------------------|----------------------------|
| 1 | 698 | 45 | | 14 | 23 | 6 | 5 | 791 | 36 | 911 | 1715 |
| 2 | 1396 | 94 | | 28 | 46 | 12 | 10 | 1586 | 72 | 1822 | 3434 |
| 3 | 2094 | 141 | | 42 | 69 | 18 | 15 | 2379 | 108 | 2733 | 5151 |
| 4 | 2792 | 188 | | 56 | 92 | 24 | 20 | 3172 | 144 | 3644 | 6868 |
| 5 | 3490 | 235 | | 70 | 115 | 30 | 25 | 3965 | 180 | 4555 | 8585 |
| 6 | 4188 | 282 | | 84 | 138 | 36 | 30 | 4758 | 216 | 5466 | 10302 |
| 7 | 4886 | 329 | | 98 | 161 | 42 | 35 | 5551 | 252 | 6377 | 12019 |
| 8 | 5584 | 376 | | 112 | 184 | 48 | 40 | 6344 | 288 | 7288 | 13736 |
| 9+ | 6273 | 418 | 101 | 120 | 202 | 75 | 40 | 7229 | 317 | 8192 | 15536 |

^{*}Out-of-state total is calculated by adding all the fees included in the in-state total plus an out-of-state tuition differential.

If you are a part-time student, you will pay tuition and /or maintenance fee at the semester hour rate, the total not to exceed the maximum amount indicated above.

| THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2020 (Fees shown are for One Semester Only) |
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