

**UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2017
(Fees shown are for One Semester Only)**

College of Medicine - Year 1

	Maintenance Fee	Progam & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Microscope Fee Spring Only	Malpractice Insurance (Fall only)	Disability Insurance	In-State Total	Out-of-State Tuition Difference	*Out-of-State Total
Hours											
1	1873	40	12	3	12	52.50	14	24	2030.50	1839	3,869.50
2	3746	80	24	6	24	52.50	14	24	3970.50	3678	7,648.50
3	5619	120	36	9	36	52.50	14	24	5910.50	5517	11,427.50
4	7492	160	48	12	48	52.50	14	24	7850.50	7356	15,206.50
5	9365	200	60	15	60	52.50	14	24	9790.50	9195	18,985.50
6	11238	240	72	18	72	52.50	14	24	11730.50	11034	22,764.50
7	13111	280	84	21	84	52.50	14	24	13670.50	12873	26,543.50
8	14984	320	96	24	96	52.50	14	24	15610.50	14712	30,322.50
9+	16846	350	100	25	120	52.50	14	24	17531.50	16546	34,077.50

College of Medicine - Year 2

	Maintenance Fee	Progam & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Microscope Fee (Fall only)	Malpractice Insurance (Fall only)	Disability Insurance Fall	In-State Total	Out-of-State Tuition Difference	*Out-of-State Total
Hours											
1	1873	40	12	3	12	52.50	14	24	2030.50	1839	3,869.50
2	3746	80	24	6	24	52.50	14	24	3970.50	3678	7,648.50
3	5619	120	36	9	36	52.50	14	24	5910.50	5517	11,427.50
4	7492	160	48	12	48	52.50	14	24	7850.50	7356	15,206.50
5	9365	200	60	15	60	52.50	14	24	9790.50	9195	18,985.50
6	11238	240	72	18	72	52.50	14	24	11730.50	11034	22,764.50
7	13111	280	84	21	84	52.50	14	24	13670.50	12873	26,543.50
8	14984	320	96	24	96	52.50	14	24	15610.50	14712	30,322.50
9+	16846	350	100	25	120	52.50	14	24	17531.50	16546	34,077.50

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 minimum charge is equivalent to two hours at the semester hour rate.

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College of Medicine - Year 3

	Maintenance Fee	Progam & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Malpractice Insurance (Fall only)	Disability Insurance	In-State Total	Out-of-State Tuition Difference	*Out-of-State Total
Hours										
1	1873	40	12	3	12	43	24	2007	1839	3846
2	3746	80	24	6	24	43	24	3947	3678	7625
3	5619	120	36	9	36	43	24	5887	5517	11404
4	7492	160	48	12	48	43	24	7827	7356	15183
5	9365	200	60	15	60	43	24	9767	9195	18962
6	11238	240	72	18	72	43	24	11707	11034	22741
7	13111	280	84	21	84	43	24	13647	12873	26520
8	14984	320	96	24	96	43	24	15587	14712	30299
9+	16846	350	100	25	120	43	24	17508	16546	34054

College of Medicine - Year 4

	Maintenance Fee	Progam & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Malpractice Insurance (Fall only)	Disability Insurance	In-State Total	Out-of-State Tuition Difference	*Out-of-State Total
Hours										
1	1873	40	12	3	12	43	24	2007	1839	3846
2	3746	80	24	6	24	43	24	3947	3678	7625
3	5619	120	36	9	36	43	24	5887	5517	11404
4	7492	160	48	12	48	43	24	7827	7356	15183
5	9365	200	60	15	60	43	24	9767	9195	18962
6	11238	240	72	18	72	43	24	11707	11034	22741
7	13111	280	84	21	84	43	24	13647	12873	26520
8	14984	320	96	24	96	43	24	15587	14712	30299
9+	16846	350	100	25	120	43	24	17508	16546	34054

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 two hours at the semester hour rate.

**UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER SCHEDULE OF MAINTENANCE, TUITION AND FEES EFFECTIVE FALL 2017
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Physician Assistant**

Hours	Maintenance Fee	Program & Services Fee	Health Service Fee	Other Dedicated Fees	Technology Fee	Malpractice Insurance Fall Only	Board Review fees	In-State Total	Out-of State Tuition Difference	*Out-of-State Total
1	1239	40	12	3	12	20	196	1522	892	2414
2	2478	80	24	6	24	20	196	2828	1784	4612
3	3717	120	36	9	36	20	196	4134	2676	6810
4	4956	160	48	12	48	20	196	5440	3568	9008
5	6195	200	60	15	60	20	196	6746	4460	11206
6	7434	240	72	18	72	20	196	8052	5352	13404
7	8673	280	84	21	84	20	196	9358	6244	15602
8	9912	320	96	24	96	20	196	10664	7136	17800
9+	11139	350	100	25	120	20	196	11950	8019	19969

*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 two hours at the semester hour rate.

*****All Physician Assistant students will be charged for Digital Course Material of \$310 for Spring Semester only.**