

NOTICE TO CURRENTLY LICENSED FACILITIES AND PROVIDERS

The Rules and Regulations for General Licensing and Enforcement Requirements, Chapter 111-8-25, require licensed or registered programs regulated through the Division of Healthcare Facility Regulation (HFR), Department of Community Health to pay licensure activity fees annually. You have 60 days from the date you are notified by HFR that the payment is due to pay the full amount using the payment coupon provided. If you do not pay the fees within 60 days, a late fee of \$150 is automatically added to the annual activity fees that are due. If you don't pay all the fees due (including the late fees), then the Department may revoke your license to operate, subject to a right to an administrative hearing on the revocation action.

To ensure that your payment is properly credited to your account, use the payment coupon form you were provided and include your Facility's Identification Number (FACID#) on any check or money order. If you have lost the payment coupon form, you can download a generic form from our website and complete it making sure that you accurately record your FACID on the form by clicking on this link.

http://dch.georgia.gov/vgn/images/portal/cit_1210/38/39/163015378Coupon1Renewal9S_ave.pdf

SEE THE SCHEDULE OF FEES LISTED BELOW TO DETERMINE THE LICENSURE ACTIVITY FEE YOU WILL BE REQUIRED TO PAY EACH YEAR.

NOTICE TO APPLICANTS FOR LICENSURE OR REGISTRATION

Any applicant submitting a voluntary application for licensure or registration is required by the Rules and Regulations for General Licensing and Enforcement Requirements, Chapter 111-8-25 to pay an application processing fee of \$300 in addition to the initial licensure activity fee for the particular program. You must download your licensure application from our website and follow the instructions in the application packet. Click on this link to view various application packets.

http://dch.georgia.gov/00/article/0,2086,31446711_144157549_145343282,00.html

When you submit your application for licensure to the Division of Healthcare Facility Regulation, you will receive a Payment Invoice Coupon with your Facility Identification Number (FACID). You will need to send a copy of this invoice and your check or money order, with your FACID on it, to the bank lockbox for processing. No work will begin on your application until the licensing application and first year fees are paid in full.

SEE THE SCHEDULE OF FEES LISTED BELOW TO DETERMINE WHAT LICENSING FEES YOU WILL BE RESPONSIBLE FOR PAYING BEFORE BECOMING LICENSED TO OPERATE YOUR PROGRAM.

SCHEDULE OF LICENSURE ACTIVITY FEES

Licensure Activity	Fee	Fee Frequency
Application Processing Fee, Change in Ownership, Change in Service Level (requiring on site visit), Name Change – Any Program	\$300	Upon submission
Initial Provisional or Regular License (Same as annual licensure activity fee for each program type)	Varies by program	Submitted with application processing fee
Involuntary Application Processing Fee subsequent to unlicensed complaint investigation	\$550	
Follow-up Visit to Periodic Inspection – Any Program	\$250	License renewal date
Licenses		
Adult Day Centers (rules to be developed)** [No licensing fees due until rules passed]	\$250 (social) \$350 (medical)	Annually
Ambulatory Surgical Treatment Centers**	\$750	Annually
Birthing Centers**	\$250	Annually
Clinical Laboratories**	\$500	Annually
Community Living Arrangements**	\$350	Annually
Drug Abuse Treatment Programs**	\$500	Annually
End Stage Renal Disease Centers**		Annually
1-12 stations	\$600	Annually
13-24 stations	\$1,000	Annually
25 or more	\$1,100	Annually
Stand Alone ESRD Facilities Offering Peritoneal Dialysis Only:	\$800	Annually
Eye Banks	\$250	Annually
HMOs (if subject to licensure)	\$2,000	Annually
Home Health Agencies**	\$1,000	Annually
Hospices**	\$1,000	Annually
Hospitals**		Annually
CAHS < 25 beds	\$250	Annually
25 < 50 beds	\$750	Annually
> 50 beds	\$1,500	Annually
Imaging Centers (rules to be developed)** [No licensing fees due until rules passed]	\$3,000	Annually
Infirmaries	\$250	Annually
Intermediate Care Facilities/MR (private)**	\$250	Annually
Narcotic Treatment Programs**	\$1,500	Annually

Nursing Homes**		Annually
1 ≤ 99	\$500	Annually
> 99	\$750	Annually
Personal Care Homes**		Annually
< 25 beds	\$350	Annually
25 < 50 beds	\$750	Annually
> 50 beds	\$1,500	Annually
Private Home Care Providers**		Annually
Companion Sitter or Personal Care	\$200 < 50 FTEs *** \$400 > 49 FTEs	Annually
Nursing Services Only	\$500 < 50 FTEs \$750 > 49 FTEs	Annually
Nursing Services and Personal Care and/or Companion Sitter	\$750 < 50 FTEs \$1,000 > 49 FTEs	Annually
Traumatic Brain Injury Facilities	\$250	Annually
X-Ray Facilities (per machine) [Initial application fee of \$300 required per site, no recurring annual licensing fees due until new rules passed]	\$300	Annually
Miscellaneous Fees:		
Civil monetary penalties as finally determined		Case-by-case basis
Late Fee: 60 days past due	\$150	Per instance
Lists of Facilities by license type (electronic only)	\$25	Per request
Replacement of Lost Permit	\$50	Per request
Returned check charge – as assessed by bank	< \$50	Per instance
Special handling charges when required (special courier/ mailing costs)	Cost	Per instance
Training materials – cost to reproduce for participant	\$.25 per page, \$5 per disk	Per participant
<p>**Eligible for a 25% discount if currently accredited by a nationally recognized accreditation organization approved by the department as having standards comparable to specific state licensure requirements, and complete copy of current decision is submitted to the department at the time of renewal or is already on file with the department. (Currently, the Division will accept current accreditation at the level Medicare (CMS) accepts for deemed status from a CMS-approved organization (at this time, this applies only to hospitals (acute care and critical access), ambulatory surgical centers, hospices, and home health agencies). If a provider/facility holds such status, they must provide to the Division evidence of such status as well as a copy of the complete survey results from the most recent accreditation survey before the</p>		

discount can be applied. (Survey summaries are not acceptable.)
***FTEs Full-time equivalent (40 hours/week) employees/contract workers rules, so a provider with less than 50 FTEs could utilize up to 99 half-time (20 hours/week) employees/contract workers.

Source Document: Rules and Regulations for General Licensing and Enforcement Requirements, Chapter 111-8-25 as amended. Click on this link to review these Rules. http://dch.georgia.gov/vgn/images/portal/cit_1210/61/33/158789778111-8-25EnforcementRulesUnofficialCopywAmendments%208-2010.pdf

MORE QUESTIONS:

Please see Frequently Asked Questions (FAQs) below or email your questions to Ms. Jamia Everson at jjeverson@dhr.state.ga.us. Ms. Everson may also be reached by phone at 404-651-8155.

FREQUENTLY ASKED QUESTIONS:

Q: HOW CAN I GET MORE INFORMATION ABOUT THE FEES I AM REQUIRED TO PAY?

A: First, check the frequently asked questions and answers here. These FAQs will be updated as necessary. If you don't see your specific question answered, then send your question to this email address jjeverson@dhr.state.ga.us and your question will be answered.

Q: MAY I PAY THE APPLICATION FEE AT THE TIME I FILE THE APPLICATION TO BECOME LICENSED AND PAY THE INITIAL LICENSURE FEE WHEN YOU GET READY TO ISSUE MY LICENSE?

A: No, the rules require you to submit the application fee and the initial licensure fee at the same time.

Q: IF I OPERATE A LICENSED FACILITY AND I AM INSPECTED BECAUSE OF A COMPLAINT THAT IS FILED, DO I HAVE TO PAY \$250 FOR THE INSPECTION?

A: No. We do not charge for routine complaint inspection visits. You would be charged \$250 if we had to do a follow-up visit on a periodic or full inspection visit and more serious rule violations were found. The purpose of that follow-up would be to check to make sure that you corrected the more serious violation that was identified during the periodic survey.

Q: WHAT IF I CAN'T PAY THE LICENSURE FEES THAT ARE DUE BY THE DUE DATE?

A: If you do not pay the fees within 60 days of the due date, a late fee of \$150 is added to the amount you owe. If you have not paid the full amount that is due within the 60 days past due date, the Department may take an action to revoke your license for non-payment of licensure fees. You would have the right to appeal the revocation through an administrative hearing.

Q: I WANT TO OPEN A SMALL PERSONAL CARE HOME. HOW MUCH WILL THE LICENSING FEES BE THE FIRST YEAR?

A: Assuming that you will be caring for no more than 24 residents, you will have to pay an application fee of \$300 and an initial licensure fee of \$350, for a total of \$650 the first year.