

## Methods for Paying the Hospital Provider Fee

In order that payments of hospital provider fees can be processed accurately and in a timely manner, the Department of Community Health has established a method by which payments can be made by electronic transfer. Operated on behalf of the Department by the Bank of America, the payment procedures include appropriate measures to assure that a hospital's funds as well as any required financial information will be handled in a secure manner.

Payment of a hospital provider fee will require that the banking information form, presented below, be submitted to the Department. Within 1 – 2 weeks after the provider information is received, Bank of America will provide the contact person identified for your hospital with detailed instructions about how electronic transfers can be made. These instructions will be mailed under separate cover from the bank and will explain that your hospital can choose to make the transfer by an internet-based transaction, with access password protected.

Please note that only your hospital controls when the payment by electronic transfer occurs and your hospital specifies the amount of payment to be made. The banking information being provided for your hospital does not allow the Department or the Bank of America to withdraw funds from your designated bank account unless your hospital initiates such a transaction.

Your submittal of the banking information form on or before August 24, 2010 should allow for your hospital's initial hospital provider fee payment to be made by electronic transfer by September 30, 2010, when the fee is due.

Send the 2 page form for Initial Electronic Transfer of Funds by fax, mail or delivery to:

Ms. Pam Smith  
Office of Financial Services  
Georgia Department of Community Health  
2 Peachtree Street, N.W. – 34th Floor  
Atlanta, Georgia 30303-3159  
Fax No. (877) 711-2262  
Telephone No. (404) 463-8614

If your hospital's electronic transfer option is not activated in time to make the initial hospital provider fee payment, the fee can be made by a check payable to the Georgia Department of Community Health. The check and information identifying the hospital for which the fee is being paid can be directed to:

Hospital Provider Fee Program  
Mrs. Paula Tolbert  
Office of Financial Services  
Georgia Department of Community Health  
2 Peachtree Street, N.W. – 34th Floor  
Atlanta, Georgia 30303-3159

Any immediate questions regarding payments by electronic transfer and the banking information form or immediate questions regarding making payments by check should be directed to Ms. Smith at the telephone number listed above or at [psmith@dch.ga.gov](mailto:psmith@dch.ga.gov). In order to avoid potential security risks, please do not submit the banking information form by e-mail.