Fee Schedule (Revised 1/1/2019)

License Type	Rate
Abortion Facility	\$155
Alcohol Drug Prevention	\$155 initial; \$80 annual; \$25 processing fee for change of name; \$80 processing fee for change of location or ownership
Alcohol and other drug entity	\$155 initial; \$80 annual; \$25 processing fee for change of name; \$80 processing fee for change of location
Alzheimer's nursing home	For Alzheimer's nursing facilities with 50 beds or less, \$750 + \$25 per bed; For Alzheimer's nursing facilities with 51 or more beds, \$1,000 + \$25 per bed
Ambulatory care clinic	\$500
Ambulatory surgical center	\$750
Behavioral Health Services Organization	\$750 initial; \$500 annual; \$250 per extension; \$25 processing fee for change of name; \$100 processing fee for change of location
Blood establishment	\$100
Chemical dependency treatment service	\$1,000 + \$25 per bed
Community mental health center	\$1,500
Comprehensive physical rehabilitation hospital	
1. Deemed hospital	For deemed hospitals with 25 beds or less, \$750 + \$25 per bed; For deemed hospitals with 26 or more beds, \$1,000 + \$25 per bed
2. Non-deemed	For non-deemed hospitals with 25 beds or less, \$750 + \$25 per bed; For non-deemed hospitals with 26 or more beds, \$1,000 + \$25 per bed
Critical access hospital	\$750 + \$25 per bed
Day health care	\$170
Family care home	\$42
Freestanding birth center	\$500
Freestanding or mobile technology	\$500
Group home	\$100
Home health agency	\$500
Hospice	\$500
Hospital	
1. Deemed hospital	For deemed hospitals with 25 beds or less, \$750 + \$25 per bed; For deemed hospitals with 26 or more beds, \$1,000 + \$25 per bed
2. Non-deemed hospital	For non-deemed hospitals with 25 beds or less, \$750 + \$25 per bed; For non-deemed hospitals with 26 or more beds, \$1,000 + \$25 per bed
Hospital-owned pain management clinic	\$500
Intermediate care facility	For intermediate care facilities with 50 beds or less, \$750 + \$25 per bed; For intermediate care facilities with 51 or more beds, \$1,000 + \$25 per bed
ICF/IID facility	For ICFs/IID with 50 beds or less, \$750 + \$25 per bed; For ICFs/IID with 51 or more beds, \$1,000 + \$25 per bed
Laboratories	\$155 initial; \$80 annual
Nursing facility	For nursing facilities with 50 beds or less, \$750 + \$25 per bed; For nursing facilities with 51 or more beds, \$1,000 + \$25 per bed
Nursing home	For nursing homes with 50 beds or less, \$750 + \$25 per bed; For nursing homes with 51 or more beds, \$1,000 + \$25 per bed
Outpatient health care center	\$500
Personal care home	\$100 + \$5 per bed
Personal services agency	\$500 initial; \$350 annual

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Tee Solication (Newson 1, 1, 2015)	
Prescribed Pediatric Extended Care Facility	\$500
Private duty nursing agency	\$134
Psychiatric hospital	
1. Deemed hospital	For deemed psychiatric hospitals with 25 beds or less, \$750 + \$25 per bed;
	For deemed psychiatric hospitals with 26 or more beds, \$1,000 + \$25 per bed
2. Non-deemed hospital	For non-deemed psychiatric hospitals with 25 beds or less, \$750 + \$25 per bed;
	For non-deemed psychiatric hospitals with 26 or more beds, \$1,000 + \$25 per
	bed
Psychiatric residential treatment facility	\$500
Renal dialysis facility	\$350 per facility and \$35.00 per station
Residential crisis stabilization unit	\$750 initial; \$500 annual; \$250 per extension; \$25 processing fee for change of
	name; \$100 processing fee for change of location
Residential hospice facility	\$500
Specialty Intermediate Care Clinic	\$500
Plans and Specifications Review	\$.10 per square foot; \$100 minimum