



**GEORGIA DEPARTMENT OF
COMMUNITY HEALTH**

Clyde L. Reese, III, Esq., Commissioner

Sonny Perdue, Governor

2 Peachtree Street, NW
Atlanta, GA 30303-3159
www.dch.georgia.gov

TO: Currently Licensed or Registered Healthcare Providers

FROM: Doug Colburn, Chief, Healthcare Facility Regulation Division (HFRD)
Department of Community Health (DCH)

SUBJECT: Licensure Activity Fee Invoice --Due October 31, 2010

DATE: October 14, 2010

Effective August 3, 2010, the Rules and Regulations for General Licensing and Enforcement Requirements, Chapter 111-8-25 require all licensed or registered programs regulated through the HFRD to pay licensure activity fees. A "Notice to Applicants and Currently Licensed Facilities and Providers" has been posted on the DCH website since July 30, 2010 regarding the new fee schedule and continues to be available on the website along with the rules for reference. These new rules were enacted as a result of the passage of Georgia House Bill 994. Our records reflect that you currently hold a license or registration subject to regulation by DCH.

Therefore, you are responsible for paying the required licensure activity fee which is due October 31, 2010.

The purpose of this memorandum is to provide you with directions on how to pay the licensure activity fees for this fiscal year. To ensure proper calculation of your fee and tracking of your invoice payment, it will be necessary for you to visit the DCH web site to print out an invoice payment coupon.

Fee Payment Directions:

1. Go to the DCH web site at www.dch.ga.gov. Click on Healthcare Facility Regulation. Click on **Licensing Renewal Payment Coupon** under Latest News, or copy the link below:
http://dch.georgia.gov/vgn/images/portal/cit_1210/38/39/163015378Coupon1Renewal9Save.pdf
2. On the far-right-hand-side of the form opposite the section marked Facility Type, you will see an arrow indicating a drop down menu. Click on the arrow for the drop down menu and select your **facility type**. Selecting the facility type displays the fee amount for this fiscal year.
3. Fill out the remainder of the form, either on line or by downloading the blank form and completing it by hand. To ensure proper crediting of your account, please make sure you **enter on the payment coupon the exact name, address and facility license number** that appeared on the mailing label for this memo.
4. Send the **completed payment coupon form with your check or money order to P. O. Box 741328, Atlanta, Georgia 30374-1328**, the return address listed on the payment coupon.

Recognizing that some businesses may not have the funds immediately available, the Department will not initiate any enforcement action before January 31, 2011. At that time, the Department may move to revoke the license or registration of any facility if the facility has failed to pay the annually recurring licensing activity fees. If you have questions concerning your fee or the payment process, you may 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.