

HOSPITAL & HOSPITAL UNIT LICENSURE FEES

The licensing fees for hospitals/hospital units are set forth in regulation, 6 CCR 1011-1 in their respective regulatory chapters. In addition, Section 13-64-301 (4), C.R.S., specifies the applicable fee under the Health Care Availability Act (HCAA). The tables below detail the fees.

General Licensure

	<i>General Hospital*</i> <i>(includes Long Term Hospitals)</i> <i>[reg effective 01/30/08]</i>	<i>Hospital Unit</i> <i>[reg effective 11/30/08]</i>	<i>Psychiatric Hospital</i> <i>Maternity Hospital</i> <i>Rehabilitation Center</i> <i>[reg effective 01/30/08]</i>
Initial license	1-25 beds: \$8,000 26-50 beds: \$10,000 51-100 beds: \$12,500 101+ beds: Base: \$9,800 Per bed: \$50 <u>Cap: \$20,000</u> HCAA: \$15	Base: \$5,300 Per bed: \$50 <u>Cap: \$10,500</u> HCAA: \$15	Base: \$5,700 Per bed: \$50 <u>Cap: \$10,500</u> HCAA: \$15
Renewal license	1-50 beds: Base: \$900 Per bed: \$12 51-150 beds: Base: \$1,400 Per bed: \$12 151+ beds: Base: \$2,000 Per bed: \$12 <u>Cap: \$8,000</u> HCAA: \$15	Base: \$1,600 Per bed: \$12 <u>Cap: \$3,000</u> HCAA: \$15	Base: \$1,600 Per bed: \$12 <u>Cap: \$8,000</u> HCAA: \$15
Change of ownership	\$2,500 HCAA: \$15	\$2,500 HCAA: \$15	\$2,500 HCAA: \$15
Provisional license	\$2,500 HCAA: \$15	\$2,500 HCAA: \$15	\$2,500 HCAA: \$15
Conditional license	10-25% of renewal fee HCAA: \$15	10-25% of renewal fee HCAA: \$15	10-25% of renewal fee HCAA: \$15

*A long term hospital is licensed as a general hospital.

<i>For Hospital Units and All Hospital Types</i>	<i>Fee</i>
Request: change of address	\$360
Request: change of bed	\$360
Request: change of name	\$360

Life Safety Code (LSC) – Plan Review

(effective dates vary as specified below)

	<i>General Hospitals Hospital Units</i>	<i>Psychiatric Hospitals Maternity Hospitals Rehabilitation Centers</i>
LSC – Initial license and new construction ¹	0-35,000 sq ft: \$0.37 35,001-200,000: \$0.03 200,001+: \$0.01 [eff: apps submitted as of 01/01/08]	Same as general hospitals and hospital units, except for effective date [eff: apps submitted as of 05/15/08]
LSC – Remodeling	<u>New construction</u> Same as initial, except <u>minimum</u> : \$2,000 [eff: permit dated on or after 01/01/08. However, upon facility request authorizes plan review when permit dated before at 10-25% discount]	Same as general hospitals and hospital units, except for effective date [eff: permit dated on or after 05/15/08. However, upon facility request authorizes plan review when permit dated before at 10-25% discount]
	<u>Remodeling – general</u> ² 0-35,000 sq ft: \$0.25 35,001-200,000: \$0.03 200,001+: \$0.01 <u>minimum</u> : \$2,000 [eff: permit dated on or after 01/01/08]	Same as general hospitals and hospital units, except for effective date [eff: permit dated on or after 05/15/08]
	<u>Remodeling – egress</u> ³ \$2,000 [eff: permit dated on or after 01/01/08]	Same as general hospitals and hospital units, except for effective date [eff: permit dated on or after 05/15/08]
	<u>Remodeling – specific systems</u> ⁴ 1-4 smoke compartments: \$2,000 ea add’l compartment: \$500 [eff: constr begun on or after 07/01/08]	Same as general hospitals and hospital units [eff: constr begun on or after 07/01/08]

¹ Explanation of fee schedule: the first 35,000 square feet of any plan submitted will be charged \$0.37 per square foot. Additional square footage over 35,000 sq ft, but less than 200,000 sq ft will be assessed at \$0.03/sq ft. Additional square footage over 200,000 square feet will be assessed at \$0.01/sq ft. So if a construction plan is for 40,000 square feet, the first 35,000 square feet is assessed at \$0.37 and the remaining square footage at \$0.03.

² The general remodeling fees apply to relocation, removal or installation of walls resulting in 50% or more of a smoke compartment being reconfigured. The cost per square footage is to be assessed for the entire smoke compartment(s) being reconfigured.

³ The egress remodeling fees apply to relocation, removal, or addition of any egress component, including but not limited to corridors, stairwells, exit enclosures, or points of refuge. (Widening of an egress component is not relocation.)

⁴ Specific system remodeling fees apply to remodeling that involves: 100 or more sprinklers (25-99 sprinklers have partial plan review for \$500); fire alarm changes to control unit; medical gas changes that affect 50% of smoke compartment; replacement of suppression or hood exhaust/duct system; replacement or addition of a generator or transfer switch of the essential electrical system. However, these fees do not apply if these changes are part of a smoke compartment reconfiguration that is subject to the general remodeling fee.