

WAC 246-338-990 Fees. (1) The department will assess and collect biennial fees for medical test sites as follows:

(a) Charge fees, based on the requirements authorized under RCW 70.42.090 and this section;

(b) Assess additional fees when changes listed in WAC 246-338-026 occur that require a different type of license than what the medical test site currently holds;

(c) Charge prorated fees for the remainder of the two-year cycle when the owner or applicant applies for an initial license during a biennium as defined under WAC 246-338-022 (2) (c);

(d) Charge prorated fees for licenses issued for less than a two-year period under WAC 246-338-024(3); and

(e) Determine fees according to criteria described in Table 990-1.

Table 990-1 License Categories and Fees

Category of License	Number of Tests/Year	Biennial Fee
Certificate of Waiver	N/A	\$260
PPMP	N/A	\$300
Low Volume	1-2,000 tests	\$620
Category A	2,001-10,000 tests, 1-3 specialties	\$1,900
Category B	2,001-10,000 tests, 4 or more specialties	\$2,450
Category C	10,001-25,000 tests, 1-3 specialties	\$3,410
Category D	10,001-25,000 tests, 4 or more specialties	\$3,910
Category E	25,001-50,000 tests	\$4,700
Category F	50,001-75,000 tests	\$5,810
Category G	75,001-100,000 tests	\$6,930
Category H	100,001-500,000 tests	\$8,090
Category I	500,001-1,000,000 tests	\$14,390
Category J	> 1,000,000 tests	\$17,260
Accredited:		
Low Volume	1-2,000 tests	\$230
Category A	2,001-10,000 tests, 1-3 specialties	\$290
Category B	2,001-10,000 tests, 4 or more specialties	\$320
Category C	10,001-25,000 tests, 1-3 specialties	\$730
Category D	10,001-25,000 tests, 4 or more specialties	\$780
Category E	25,001-50,000 tests	\$1,090
Category F	50,001-75,000 tests	\$1,740
Category G	75,001-100,000 tests	\$2,390
Category H	100,001-500,000 tests	\$3,090
Category I	500,001-1,000,000 tests	\$8,920

Table 990-1 License Categories and Fees

Category of License	Number of Tests/Year	Biennial Fee
Category J	> 1,000,000 tests	\$11,330
Follow-up survey for deficiencies		Direct staff time
Complaint investigation		Direct staff time

(2) The following programs are excluded from fee charges when performing only waived hematocrit or hemoglobin testing for nutritional evaluation and food distribution purposes:

- (a) Women, infant and children programs (WIC); and
- (b) Washington state migrant council.

[Statutory Authority: RCW 43.70.250 and 70.42.090. WSR 23-04-099, § 246-338-990, filed 1/31/23, effective 4/1/23; WSR 20-20-030, § 246-338-990, filed 9/29/20, effective 11/1/20. Statutory Authority: RCW 70.42.090. WSR 06-15-132, § 246-338-990, filed 7/19/06, effective 8/19/06. Statutory Authority: RCW 70.42.090 and 2002 c 371. WSR 02-12-105, § 246-338-990, filed 6/5/02, effective 7/6/02. Statutory Authority: RCW 70.42.005, 70.42.060. WSR 01-02-069, § 246-338-990, filed 12/29/00, effective 1/29/01. Statutory Authority: RCW 70.42.090. WSR 99-24-061, § 246-338-990, filed 11/29/99, effective 12/30/99; WSR 96-12-011, § 246-338-990, filed 5/24/96, effective 6/24/96. Statutory Authority: Chapter 70.42 RCW. WSR 94-17-099, § 246-338-990, filed 8/17/94, effective 9/17/94; WSR 93-18-091 (Order 390), § 246-338-990, filed 9/1/93, effective 10/2/93; WSR 91-21-062 (Order 205), § 246-338-990, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. WSR 91-02-049 (Order 121), recodified as § 246-338-990, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. WSR 90-20-017 (Order 090), § 248-38-120, filed 9/21/90, effective 10/22/90.]