



## Medical Waste Management Program



### Current Fees

A medical waste generator, subject to the registration requirements of the Medical Waste Management Act, shall submit the appropriate annual registration fee to the California Department of Public Health, Medical Waste Management Program. The fee can be found below, and shall be submitted with the registration and/or permit application, and upon receipt of an annual registration renewal notice.

| <b>SMALL QUANTITY GENERATORS (SQG)<br/>(GENERATES LESS THAN 200 POUNDS PER<br/>MONTH)</b>                 | <b>ANNUAL FEE</b>               |
|---|---------------------------------|
| SQG without onsite treatment  | \$25                            |
| SQG with onsite treatment<br>(Treatment by autoclaving or some types of alternative<br>treatment methods) | \$100<br>(Paid every two years) |

| <b>COMMON STORAGE FACILITY (CSF)</b> | <b>ANNUAL FEE</b> |
|--------------------------------------|-------------------|
| CSF serving 2-10 generators          | \$100             |
| CSF serving 11-49 generators         | \$250             |
| CSF serving 50 or more generators    | \$500             |

| <b>LARGE QUANTITY GENERATOR<br/>FACILITY TYPES*</b>         | <b>ANNUAL FEE<br/>WITHOUT<br/>ONSITE<br/>TREATMENT</b> | <b>ANNUAL FEE<br/>WITH ONSITE<br/>TREATMENT</b> |
|---|--|---|
| Acute Care Hospital 1-99 bed capacity                       | \$600  | \$900   |
| Acute Care Hospital 100-199 bed capacity                    | \$860  | \$1,360   |
| Acute Care Hospital 200-250 bed capacity                    | \$1,100  | \$1,600   |
| Acute Care Hospital 251 or more beds                        | \$1,400  | \$2,400   |
| Skilled Nursing Facility 1-99 bed capacity                  | \$275  | \$575   |
| Skilled Nursing Facility 100-199 bed capacity               | \$350  | \$650   |
| Skilled Nursing Facility 200 or more beds                   | \$400  | \$700   |
| Specialty Clinic (surgical, dialysis,<br>liposuction, etc.) | \$350  | \$650   |
| Acute Psychiatric Hospital                                  | \$200  | \$500   |
| Intermediate Care   | \$300  | \$600   |
| Primary Care Clinic   | \$350  | \$650   |
| Clinical Laboratory   | \$200  | \$500   |
| Health Care Service Plan Facility                           | \$350  | \$650   |
| Veterinary Clinic or Hospital                               | \$200  | \$500   |
| Medical/Dental/Veterinary Office                            | \$200  | \$500   |

| <b>TRAUMA SCENE WASTE (TSW)</b>            | <b>ANNUAL FEE</b> |
|--|-------------------|
| Trauma scene waste management practitioner | \$200             |

| <b>OFFSITE TRANSFER &amp; TREATMENT FACILITIES</b>                          | <b>ANNUAL FEE</b>                              |
|---|--|
| Offsite Transfer Station (plus \$100/hour initial application review fee)   | \$2000   |
| Offsite Treatment Facility (plus \$100/hour initial application review fee) | \$12,000 or \$0.0127/lb., whichever is greater |

**Mail the application and fee to:**  
California Department of Public Health  
Medical Waste Management Program  
IMS K-2, MS 7405  
P.O. Box 997377  
Sacramento, CA 95899-7377

**Or courier to:**  
California Department of Public Health  
Medical Waste Management Program  
1725 23rd St, Ste 110  
Sacramento, CA 95816