# AMBULATORY CARE: COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY APPLICATION

# INSTRUCTIONS FOR COMPLETION

Incomplete applications will be returned. Prior to submitting the application, ensure it includes all required information, related required documentation.

#### **APPLICATION FOR LICENSE**

Once all required application paperwork, including appropriate approvals (CMS-855), and the fee is received, an OHCQ representative will contact your program to schedule a date for initial Federal certification and State licensure inspections.

Be advised that an on-site Medicare inspection cannot be made until the CMS-855 has been reviewed and approved by Centers for Medicare and Medicaid Services (CMS).

#### **RENEWAL**

Be advised that unannounced on-site recertification and complaint investigation surveys are being conducted by the OHCQ.

#### FEE

There is no associated fee.

## **REQUIRED APPLICATION SECTIONS**

General Information Ownership Background Workers' Compensation Comprehensive Outpatient Rehabilitation Facility Affidavit

### **REQUIRED DOCUMENTATION - INITIAL APPLICATION**

- 1. Medicare forms completed in triplicate with original signatures. (The Medicare General Enrollment Booklet (CMS-855) can be obtained by contacting your Fiscal Intermediary, 877-235-8073. Any questions regarding the booklet should be directed to Novitas Solutions, Inc. at <u>www.novitas-solutions.com</u>.)
- 2. A copy of the accreditation letter from the Commission on Accreditation of Rehabilitation Facilities.
- 3. If your program does not have workers' compensation insurance **AND** does not have any employees, submit a Letter of Exemption (sole proprietorships or partnerships) or Certificate of Compliance (corporations or LLCs) from the Certificate of Compliance Coordinator at the Workers' Compensation Commission. For information call 410-864-5100 or via e-mail at www.wcc.state.md.us.

### CODE OF MARYLAND REGULATIONS (COMAR) 10.07.18

To obtain a copy of the regulations:

- A. Visit the Division of State Documents website at www.dsd.state.md.us;
- B. Call the Division of State Documents at 410-974-2486 x3876 or 800-633-9657 x3876; or
- C. Visit your library (click this link to find the closest location: www.dsd.state.md.us/Depositories.aspx).

### QUESTIONS

Please contact 410-402-8269 or visit the OHCQ website at <a href="http://health.maryland.gov/ohcq">http://health.maryland.gov/ohcq</a> for questions related to the application.

# SEND COMPLETED APPLICATION TO:

Ambulatory Care Program OHCQ 7120 Samuel Morse Drive Second Floor Columbia MD 21046