

Initial Application for Certificate of Registration for Out-of-State Mobile Health Care Entity



Dear Applicant:

This letter instructs the applicant on how to obtain a certificate of registration to operate an out-of-state mobile health care entity. Prior to operating an out-of-state mobile health care entity in Indiana, a certificate of registration must be obtained from the Indiana Department of Health (IDOH) by submitting a completed application to the Division of Home and Community Based Care, Indiana Department of Health on the designated form. The prospective provider must submit all applicable documentation, and must be able to show compliance with the Indiana Statute, IC 16-41-42.1 and State Rules 410 IAC 15.1.

The [Application for Registration to Operate an Out of State Mobile Health Care Entity](#) (State Form 53398) must be completed and submitted to this Division, along with supporting documents and/or required information.

Mail the entire application packet to:

**Indiana Department of Health
Division of Home and Community Based Care
2 North Meridian St., 4A
Indianapolis, IN 46204**

The individuals who sign the application form must be either the **owner, officer, or director of the applicant entity** and the **mobile medical unit manager**. The individuals must be listed on the application.

Submission of the completed application and all required supporting documents will avoid unnecessary delays in obtaining authority to operate a new out-of-state mobile health care entity.

The information required to be submitted with the initial application (Application for Registration to Operate an Out of State Mobile Health Care Entity (State Form 53398) is listed in ***“Initial Application Documentation Required”*** document.

If you have any questions regarding the application process please contact Bobbie Nelson, Program Director at 317-233-7492 or email bnelson@isdh.in.gov.

INITIAL APPLICATION DOCUMENTATION REQUIRED:

Application for Registration To Operate An Out-of-State Mobile Health Care Entity to Operate a Health Care Entity (State Form 53398)

- Ensure all SECTIONS on the application are completed and all required documentation submitted with the application.

Indiana Secretary of State (SOS) - Submit applicable SOS document

- If a limited Partnership, submit a copy of the "Application for Registration and "Certificate of Registration" signed by the Indiana Secretary of State.
- If a Corporation, submit a copy of the "Articles of Incorporation" and Certificate of Incorporation" signed by the Indiana Secretary of State.
- If applicant is an out of state corporation (foreign corporation), submit a copy of the "Certificate of Authority" to do business in the State of Indiana" signed by the Indiana Secretary of State.
- If a Limited Liability Company, submit a copy of the "Articles of Organization" and the "Certificate of Organization" signed by the Indiana Secretary of State.
- If the "doing business as" (d/b/a) name is different from the corporation's (direct owner) name submit "Certificate of Assumed Business Name" or "Articles of Incorporation" that list the owner and d/b/a name signed by the Indiana Secretary of State.

Internal Revenue Service (IRS)

- A document from the Internal Revenue Service that reflects the direct owner legal entity name and EIN number.

License/Certificate/Registration/Documentation Required

- Licensure-Registration
 - Submit copies of license/certification/registration of each state/county/province that facility is license/certified/registered in.
- Staffing Information
 - Submit copies of employees license, certification or registered in a health care profession for Indiana or any other state.
- Services & Equipment Contracts
 - Submit contracts on any health care services that are to be provided under a contract between the facility
 - Submit copies applicable license, certification, or registration on contract staff.
 - The staff must be licensed, certified, and/or registered in the state the test result are read.
- Test Results Read - staff must be licensed, certified, and/or registered in the state the test result are read.
 - Submit a procedure on the manner in which test results are disclosed to the patient and recommendations for health care based on the test results.



Information

- To expedite the application process
 - Ensure all sections on the application are complete and accurate.
 - Ensure all of the required information is submitted with the application to the IDOH.
 - Ensure the application is signed and dated by authorized persons.
- A certificate of registration will be issued when all required information has been received and the "Application for Registration to Operate an Out of State Mobile Health Care Entity (State Form 53398)" application is approved.
- Review all regulations and requirements before submitting your initial application to the Indiana Department of Health (IDOH).

