APPLICATION FOR A NEW RESIDENTIAL CARE FACILITY

Enclosed are the application forms and required documentation for application for license to operate a residential care facility. https://www.in.gov/health/files/A00162-1.pdf An application should include the following forms and/or documentation:

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1. State Form 8200, Application For License To Operate A Health Facility, to include required attachments/backup documentation.   This form is available at https://forms.in.gov/Download.aspx?id=4691
2. State Form 19733, Implementing Indiana Code 16-28-2-6. This form is available at https://forms.in.gov/Download.aspx?id=9627
3. Documentation of the applicant entity's registration with the Indiana Secretary of State;
4. Internal Revenue Services (IRS) documentation – Submit a document from the IRS that reflects the legal entity's name and EIN. The document must be **from the IRS sent to the provider** not a form/document the provider completed and sent to the IRS;
5. State Form 51996, Independent Verification of Assets and Liabilities, to include required attachments. This form is available at https://forms.in.gov/Download.aspx?id=6250)
6. Licensure fee; $200 for the first fifty (50) beds and $10 for each additional bed;
7. State Form 4332, Bed Inventory. This form is available at https://forms.in.gov/Download.aspx?id=4659
8. Facility floor plan on 8 ½" x 11" paper to show room numbers and number of beds per room;
9. State Form 55282 Proposed Staffing Structure.   This form is available at https://forms.in.gov/Download.aspx?id=11170
10. State Form 55283 Contract and Service Agreement Checklist. This form is available at https://forms.in.gov/Download.aspx?id=11172

The following is a general outline of the application process (in approximate chronological order):

1. Submit plans and specifications for new construction or an existing building to the Indiana State Department of Health, Health Care Engineering program for review and approval. Information for plans approval can be found at http://www.in.gov/isdh/24382.htm
2. Submit the above application documents to the address below. These documents must be submitted and approved before the inspections can be conducted;
3. Once plans and specifications have been approved, and new construction or remodeling of an existing building is substantially complete, please notify to the address below;
4. Send a written request for the applicable fire safety inspections (State Fire Code) to the Program Director-Provider Services, Division of Long Term Care;
5. Once the applicable fire safety inspections have been conducted and released, the Division of Long Term Care will issue an Authorization to Occupy letter and a provisional license to the applicant (residents may be admitted upon receipt of this authorization);
6. The initial licensure survey will be conducted before the facility's provisional license expires;
7. Upon completion of the initial licensure survey, the Division of Long Term Care will forward the survey results to the facility via the Survey Report System.

Please mail completed application packets to the following address:
Long Term Care – Provider Services
Indiana State Department of Health
2 N. Meridian St., Section 4-B
Indianapolis, IN 46204

If you have questions contact Provider Services at Ltcproviderservices@health.in.gov .

Additional information
A six (6) digit state facility number will be assigned at the time the plans are filed with the Indiana State Department of Health's Health Care Engineering Program.

The facility cannot relocate or make any other bed changes without the approval of ISDH. The bed inventory and floor plan submitted and approved by ISDH at the time of opening remains the facility's current bed configuration until the facility submits and ISDH approves a new configuration.

Each time a facility's license expires, regardless of the length of the license, a renewal application and licensure fee will need to be submitted to ISDH.

Information on the Survey Report System can be found on the Long Term Care website at
https://gateway.isdh.in.gov/Gateway/SignIn.aspx .