# AMBULATORY CARE: AMBULATORY SURGERY CENTER (ASC) APPLICATION

#### INSTRUCTIONS FOR COMPLETION

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

### APPLICATION FOR LICENSE

Once all required application paperwork and the fee is received, an OHCQ representative will contact your program to schedule a date for an initial State licensure inspection. A State license will be issued based on the results of the on-site inspection.

### **RENEWAL**

Be advised that unannounced on-site recertification and complaint investigation surveys are being conducted by the OHCQ. If the facility is accredited and/or deemed, provide a copy of the accreditation and/or deemed status letter.

#### **FEE**

The non-refundable application fee is \$1,000.

The application fee must be submitted with the application. Make the business check, cashier's check, money order, or personal check payable to: "DHMH." Starter checks will not be accepted.

### REQUIRED APPLICATION SECTIONS

**General Information** 

Fees

Ownership

Background

Workers' Compensation

**Ambulatory Surgery Center** 

**Affidavit** 

## REQUIRED DOCUMENTATION - INITIAL APPLICATION

- 1. If the facility is accredited and/or deemed, provide a copy of the accreditation and/or deemed status letter.
- 2. A copy of the Certificate of Need (CON) approval from the Maryland Health Care Commission. (A CON review can be requested by calling 410-764-3460.)
- 3. 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 www.novitas-solutions.com.)
- 4. 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 <a href="https://www.wcc.state.md.us">www.wcc.state.md.us</a>.

# CODE OF MARYLAND REGULATIONS (COMAR) 10.05 Freestanding Ambulatory Care Facility

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).

### MEDICARE CERTIFICATION

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).

CMS has identified initial ASCs as a low priority for State Agencies. ASCs have a deemed status option. To obtain Medicare certification more quickly, you may consider contacting an Accreditation Organization.

New providers must be in operation and providing services to patients when surveyed for Medicare certification. This means that at the time of survey, the ASC must have opened its doors to admissions, be furnishing all services necessary to meet the provider definition, and be demonstrating the operational capability of all facets of its operations. To be considered "fully operational," initial applicants must be servicing a sufficient number of patients so that compliance with all requirements can be determined. If possible, the OHCQ will conduct the survey within 90 calendar days of the date the provider notified the OHCQ of full operation.

### **QUESTIONS**

Please contact 410-402-8270 or visit the OHCQ website at <a href="http://dhmh.maryland.gov/ohcq">http://dhmh.maryland.gov/ohcq</a> for questions related to the application.

## **SEND COMPLETED APPLICATION TO:**

Ambulatory Care Program OHCQ Bland Bryant Building Spring Grove Hospital Center 55 Wade Avenue Catonsville, MD 21228