

DEPARTMENT OF PUBLIC HEALTH & HUMAN SERVICES

Dear Prospective Intermediate Care Facility for Developmental Disabilities Provider:

Thank you for your interest in Intermediate Care Facility for Developmental Disabilities in Montana. This letter is intended to guide you through the licensing process.

The following items must be submitted to the Licensure Bureau in order to license your facility:

- Application. The online licensure application portal can be located at: <u>https://dphhs.mt.gov/qad/Licensure/HealthCareFacilityLicensure/Ibfacilityapplications/group</u> <u>home</u>
- Floor Plan: All applicants must submit a floor plan (can be hand drawn if dimensioned) of your facility indicating the size of all areas utilized by the residents. If the bedroom has any built-in obstruction (i.e. a closet or bookcase) measurements are made from the front of the closet door/bookcase, (not from the closet back wall) to the opposite wall.
- If the facility uses well water, please submit a copy of a Certified Laboratory Report of the well water for potability dated within the past year. Please contact your local County Health Department for assistance.
- □ If the facility is not on a city sewer system, please submit a copy of the local County Health Department septic system inspection. As a septic system is approved based on the number of bedrooms in a facility, the septic system inspection report must reflect the number of bedrooms (please note – number of bedrooms, not number of residents) in the facility applied for.
- □ Articles of Incorporation, Bylaws or Letter from Sponsoring Board
- Organizational Chart
- □ List of Board of Directors including terms of office and addresses (As applicable)
- □ List of all Licensed Professionals and License Numbers
- □ Job Descriptions for each staff
- Policies and Procedures, for review and approval. These must be submitted at least forty-five (45) days prior to the expected facility opening date. The rules describing the regulatory requirements for intermediate care facility for developmental disabilities can be found at the web address above.
- □ Fire Marshal Certification

In addition to submission of all the aforementioned information and documentation, you will need to schedule an onsite physical compliance inspection with the Bureau Construction Consultant. Review and approval of all required documentation, and approval by the Construction Consultant are required prior to the issuance of a license. You may not admit residents in your facility until you are licensed.

Upon submission and approval of all the aforementioned information and documentation and the final approval from the Bureau construction consultant, the Licensure Bureau will issue a six (6) month provisional license. A surveyor from the Licensure Bureau will conduct an on-site survey of the facility within the provisional license period to assess compliance with Intermediate Care Facility for Developmental Disabilities regulations. This visit is also an opportunity for the facility to obtain any clarification on those regulations.

If you have further questions, or questions during the licensure process, you may contact the Licensure Bureau at 406-444-2676.

Sincerely,

Taxa Wooten

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