

# I N F O R M A T I O N   S H E E T

## F A C I L I T Y / A G E N C Y   L I C E N S I N G   R E Q U I R E M E N T S

The Bureau of Licensing, Certification and Resident Assessment, Division of Health Systems Improvement, Utah Department of Health, licenses all health care facilities and agencies designated by Utah Code 26-21-2. The Department, through the Bureau, will issue a license when it determines that a facility/agency is in compliance with state law and applicable rules.

A facility/agency must first be licensed by the Department prior to obtaining Medicare/Medicaid certification. Certification standards may differ from State Licensure standards. Contact the Survey Manager, Bureau Medicare/Medicaid Program Certification and Resident Assessment, 288 North 1460 West, (4th floor), P.O. Box 144103, Salt Lake City, Utah 84114-4103, telephone no. 801-538-6158 for certification information.

To facilitate the licensing process, the provider should complete the following:

A.     NOTICE OF INTENT.

1.     Contact the appropriate city/county planning and zoning authority to determine if you are able to establish a business at the desired location.
2.     Follow the plan review process for all new construction, or remodeling of an existing building to create a health care facility.

B.     LICENSING ORIENTATION.

1.     The prospective licensee, or a representative who will be responsible for coordinating the licensure process, must attend a licensing orientation to coordinate review of all required documents and payment of fees, **PRIOR TO SUBMITTING ANY LICENSING DOCUMENTS.**
2.     Read the Health Facility Licensing Rules distributed at the Orientation.
3.     Submit a completed "Notice of Intent" and the application fee to the Bureau. **THESE ITEMS MUST BE RECEIVED BEFORE ANY LICENSURE REVIEW WILL BE INITIATED.**

C. LICENSURE REVIEW OF PROGRAM DESCRIPTION AND POLICY AND PROCEDURE MANUAL. Submit documents at least 90-days prior to the scheduled opening.

1. Prepare a written program description of the functions and location of the proposed facility/agency. The following shall be included: the geographic area to be served, staffing patterns, services to be offered, and other basic information relating to the facility/agency purpose.
2. The policy and procedure manual shall be typed and indexed with a crosswalk. The manual shall address the standards and requirements set forth in the Utah Administrative Code for the proposed health facility/agency license requested. PLEASE ALLOW 60 DAYS AFTER SUBMISSION FOR COMPLETION OF THE INITIAL REVIEW. ADDITIONAL TIME MAY BE REQUIRED TO REVISE THE SUBMITTED POLICY AND PROCEDURE MANUAL BEFORE RECEIVING BUREAU APPROVAL.

D. APPLICATION.

Submit completed application form, licensing fees, and all required clearances to the Bureau.

E. ONSITE INSPECTION.

Schedule a date with the Bureau to conduct an onsite prelicense inspection. Allow at least five days after policy and procedure manual approval for receiving the inspection.

**THE FACILITY/AGENCY MAY NOT BEGIN OPERATION UNTIL A LICENSE IS ISSUED.**

Bureau of Health Facility Licensing,  
Certification and Resident Assessment  
PO Box 144103  
Salt Lake City, Utah 84114-4103  
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