FAQs for Ambulatory Care Licensure.

Q. What types of providers are licensed by the Ambulatory Care Programs Unit?
A. The Ambulatory Care Programs Unit is responsible for State licensure and/or federal certification (Medicare) of all non-long term care facilities that include:

- In-home providers: Home Health Agencies (HHA); Residential Service Agencies (RSA); Health Care Staff Agencies (HCSA); Nurse Referral Service Agencies (NRSA); and Hospice Care Providers.
- Freestanding Ambulatory Care Facilities: Ambulatory Surgery; Endoscopy; Kidney Dialysis; Birthing Centers, Facilities that use Major Medical Equipment, Surgical Abortion Facilities and Cosmetic Surgical Facilities.
- Out-patient Services: Physical Therapy (PT) Providers; Rehabilitation Facilities and Portable X-ray Providers.

B. What is the difference between a Home Health Agency (HHA) and a Residential service agency (RSA)?

Home Health Agency:
- Means a health-related institution, organization, or a part of an institution that:
  - Is owned or operated by one or more persons, whether or not for profit and whether as a public or private enterprise; and
  - Directly or through a contractual arrangement, provides to a sick or disabled individual in the residence of that individual skilled nursing services, home health aide services, and at least one other home health care service, that are centrally administered.

Residential Service Agency (RSA):
- Means any individual, partnership, firm, association, corporation, or other business entity of any kind that is engaged in a nongovernmental business of employing or contracting with individuals to provide at least one home health care service for compensation to an unrelated sick or disabled individual in the residence of that individual or an agency that employs or contracts with individuals directly for hire as home health care providers.
- May provide skilled nursing and aides or two or more services as long as aide services are not used.
- Is a State only program.
- May participate in Medicaid.
- May not participate in Medicare (exception – DMEs).

Q. What requirements must I fulfill before obtaining a license from OHCQ to operate a Home Health Agency?
A. Prior to completing and submitting an application to the Office of Health Care Quality, you must obtain a Certificate of Need (CON) from the Maryland Health Care Commission. You may obtain information about that process at the following website: http://mhcc.maryland.gov. Once that process is complete and you have obtained a certificate of need, then you would download and complete the application on the OHCQ website.
Q. Where can I find the regulations for each type of ambulatory care program?
A. To obtain a copy of the regulations you may do one of the following:
   - Visit the Division of State Documents website at www.dsd.state.md.us.
   - Call the Division of State Documents at 410-974-2486 ext. 3876 or 800-633-9657 ext. 3876.
   - Visit http://www.dsd.state.md.us/comar/searchall.aspx

Q. How do I receive a RSA license for skilled nurses and aides?
A. In accordance with the Code of Maryland Regulations (COMAR) 10.07.05, the following must be received by our office before a license can be issued:
   - The completed application and a check or money order for the required fees based on the program type. The application can be downloaded from the following website: http://dhmh.maryland.gov/ohcq/AC/sitePages/Licensure-Application.aspx. Please note - Application fees are non-refundable.
   - A list of licensed personnel (if applicable). Identify licensed supervisory personnel. Be sure to include license verification.
   - A list of non-licensed personnel (identify positions held).
   - Policies and procedures and sample files as required by COMAR 10.07.05.
   - Business plan.
   - Registration with MDAT.
   - Proof of workers’ compensation.

Staff will review the information provided. When you have received the written approval, have implemented the above policies and procedures and marketed for the required 3-5 clients as well as for personnel, you must then submit the following:
   - The signed Statement of Readiness;
   - A copy of the signed contract between your company and the Registered Nurse that you have hired;
   - A list of personnel with positions held;
   - Licensure/certification verification for all licensed/certified personnel;
   - A completed organizational chart.

Once this is received and reviewed a 90-day Provisional License will be issued. You must at that time admit 3-5 patients who will receive skilled nursing or aide services. You must admit the patients within 45 days. An on-site survey will be conducted by the OHCQ nurse surveyor once you have admitted 3-5 patients, on or after the 45th day.

Q. How long is the application review process for an RSA?
A. Please be advised that due to the volume of RSA applications, the application review period may be up to 6 MONTHS and there will be a 90-day Provisional Licensure period and an on-site survey for agencies applying to provide services other than Durable Medical Equipment.

Additionally, due to Budgetary Constraints, the issuance of Provisional Licenses to new Residential Service Agencies or current Residential Service Agencies that want to upgrade their license will be delayed up to 6 months. New Residential Service Agencies or current Residential Service Agencies that want to upgrade their license may forward their policies and procedures, application and non-refundable fee and their request, but there will be a delay of up to 9 months.