§ 558.13 Obtaining an Initial License

- (a) The following staff must complete the Presurvey Training before submitting an application for a license:
- (1) the administrator and alternate administrator; and
- (2) the supervising nurse and alternate supervising nurse of an agency that provides licensed home health services with or without home dialysis designation, licensed and certified home health services with or without home dialysis designation, or hospice services.
- (b) An applicant may request to be licensed in one or more of the following categories:
- (1) licensed and certified home health services;
- (2) licensed and certified home health services with home dialysis designation;
- (3) licensed home health services;
- (4) licensed home health services with home dialysis designation;
- (5) hospice services; or
- (6) personal assistance services.
- (c) HHSC does not require an agency to be licensed in more than one category if the category for which the agency is licensed includes the services the agency provides.
- (d) An applicant who has requested the category of licensed and certified home health services on the initial license application must also apply to CMS for certification as a Medicare-certified agency under the 42 United States Code Chapter 7, Subchapter XVIII.
- (1) While the applicant is waiting for CMS to certify it as a Medicare-certified agency:
- (A) HHSC issues an initial license reflecting the category of licensed home health services if the applicant meets the criteria for the license; and
- (B) the applicant must comply with the Medicare conditions of participation for home health agencies in 42 CFR Part 484, as if the applicant were dually certified.
- (2) If CMS certifies an agency to participate in the Medicare program during the initial license period, HHSC sends a notice to the agency that the category of licensed and certified home health services has been added to the license. If the agency wants to remove the licensed home health services category from the agency's license after the category of licensed and certified home health services has been added, the agency must submit to HHSC an application through the online portal to remove that category from the agency's license.
- (3) If CMS denies certification to an agency or an agency withdraws the application for participation in the Medicare program, the agency may retain the category of licensed home health services on its license.
- (e) An applicant for an initial license must comply with § 558.30 of this subchapter (relating to Operation of an Inpatient Unit at a Parent Agency) to operate an inpatient unit at the applicant's parent agency.

Notes

The provisions of this §558.13 adopted to be effective June 1, 2006, 31 TexReg 1455; amended to be effective January 17, 2018, 43 TexReg 238; Transferred from Title 40, Chapter 97 by Texas Register, Volume 44, Number 15, April 12, 2019, TexReg 1893, eff. 5/1/2019; Amended by Texas Register, Volume 46, Number 15, April 9, 2021, TexReg 2429, eff. 4/25/2021