

4766-2-02

Application for initial or renewal licensure.

[Comment: For dates and availability of material incorporated by reference in this chapter of the Administrative Code, see rule 4766-2-18 of the Administrative Code.]

(A) A MTO applying for initial licensure shall file with the board an "Application for Ambulance or Mobile Intensive Care License" form ~~application on the form prescribed by the board, as published on the board's website at <http://omtb.ohio.gov/Forms/Form1.pdf>, dated April 16, 2012, in the English language, and shall submit the completed application to the board; accompanied by the appropriate fee as defined in rule 4766-2-03 of the Administrative Code.~~

(1) Accompanied by the appropriate fees as set forth in rule 4766-2-03 of the Administrative Code and;

(2) With all required supporting documentation as set forth in this rule.

(B) A MTO applying for renewal of a license shall file with the board a "Renewal Application for Ambulance or Mobile Intensive Care License" form in the English language, and shall submit the completed application to the board:

(1) Accompanied by the appropriate fees as set forth in rule 4766-2-03 of the Administrative Code and;

(2) With all required supporting documentation as set forth in this rule that must be received by the board prior to the expiration date of the license.

~~(B)~~(C) In addition to the requirements set forth in section 4766.04 of the Revised Code, for each application the MTO applicant shall provide and maintain documentation of:

(1) The name of service, organizational structure, and address of applicant as follows:

(a) Name;

(b) Identification of organizational structure as a corporation (whether for profit or not-for-profit); limited liability company; partnership; limited liability partnership; government unit; or sole proprietor (individual human);

(c) Tax identification (tax ID) number or employer identification number (EIN);

~~(e)~~(d) All other names under which applicant plans to operate while using the

same tax ID or EIN number. Business organizations with different tax ID or EIN numbers cannot operate under the same license;

~~(d)~~(e) Copies of all trade name registrations and fictitious name registrations for all other names under which applicant plans to operate on file with the Ohio secretary of state;

~~(e)~~(f) Address of physical location of applicant's headquarters (no post office box);

~~(f)~~(g) Mailing address of applicant;

(2) All medicare provider numbers; ~~all medicare provider numbers;~~

(3) All medicare provider numbers;

~~(3)~~(4) Highest level of service to be provided; ~~service areas including county and state;~~

(5) Service areas including county and state;

~~(4)~~(6) A list of the names of all officers, directors, and/or owners of the MTO;

~~(5)~~(7) The name, ~~address and physician license or certificate number of the medical director as and state of licensure;~~ contact information, and state of Ohio medical license number of the service's medical director;

(8) Proof that the medical director is in compliance with the requirements for a medical director as set forth in rule 4765-3-05 of the Administrative Code.

~~(6)~~(9) For each satellite base, the MTO shall provide the ~~street~~physical address, city, county, state, and zip code;

~~(7)~~(10) The name of the primary contact person(s), business or administrative office telephone number, email address, and if applicable, office ~~fax~~fax number ~~and e-mail address~~;

~~(8)~~(11) Year of manufacture, make, model, vehicle identification number, odometer reading, and license plate number (renewal only) of each ambulance or non-transport vehicle to be permitted;

~~(9)~~(12) A color photograph of the side of applicant's vehicle displaying color

scheme, insignia, monogram, or other distinguishing characteristics. If multiple color schemes, insignias, monograms, or other distinguishing characteristics are used, a color photograph of each ~~must~~shall accompany application. ~~(Digital photographs are preferred);~~

(a) Color photographs shall be submitted to the division:

(i) With all initial "Application for Ambulance or Mobile Intensive Care License" forms; and

(ii) Within thirty days of the date a change is made to the vehicle's color scheme, insignia, monogram, or other distinguishing characteristics.

(b) Digital photographs are preferred.

~~(10)~~(13) A current certificate of liability insurance, in the name of the applicant, listing ~~Ohio medical transportation board~~the board as a certificate holder with a thirty day cancellation notice as specified in section 4766.06 of the Revised Code:

(a) The actual name on the license application shall appear on the certificate of liability insurance;

(b) Each permitted vehicle with vehicle identification number (VIN) shall be listed on the certificate of liability insurance.

~~The actual name on the licensure application shall appear on the certificate of liability insurance;~~

~~(C) Each MTO shall pay the appropriate fees as specified in rule 4766-2-03 of the Administrative Code.~~

~~(D) If an application for licensure is incomplete, the board will notify the applicant that the application will not be processed until it is complete. Such notification will occur via certified mail one time for each submission. An application that is not completed in the manner as specified on the application or does not include all required documentation shall be deemed incomplete.~~

(E) An application deemed incomplete shall not be considered and may be returned with the notation to the applicant indicating the reason the application is incomplete.

(F) Failure to provide the required documents within thirty days of the date the initial "Application for Ambulance or Mobile Intensive Care License" form is received by the division may result in the application being deemed incomplete.

~~(G)~~ A MTO shall submit a completed "Renewal Application for Ambulance or Mobile Intensive Care License" form, appropriate fees, and supporting documentation to the board prior to the expiration of the MTO's license in order to be considered timely.

~~(E)~~~~(H)~~ The certificate of licensure issued by the board shall indicate the highest level of service the MTO is authorized to provide.

~~(F)~~~~(I)~~ Licenses shall be issued. The board shall issue licenses to MTOs ~~who~~that meet the criteria to provide the following levels of service:

(1) Basic life support;

(2) Intermediate life support;

(3) Advanced life support.

~~(G)~~~~(J)~~ No applicant or ~~licensee~~licensed MTO shall submit false, misleading, or deceptive information statements in order to obtain a license or permit.

~~(H)~~~~(K)~~ A license is only valid for the MTO for which it is issued and is not transferable.

Effective: 06/15/2017

Five Year Review (FYR) Dates: 01/13/2017 and 03/15/2022

CERTIFIED ELECTRONICALLY

Certification

03/21/2017

Date

Promulgated Under: 119.03
Statutory Authority: 4766.03
Rule Amplifies: 4766.03, 4766.04, 4766.07
Prior Effective Dates: 07/02/2009, 04/16/2012