**Section 230.300 Application Processing**

a) An application for initial Medicare or Medicaid certification shall be submitted to the Department in accordance with instructions from the Health Care Financing Administration (HCFA), if required. Information requested may include, but is not limited to:

1) Applicant information, including whether the applicant is an individual or organization, Board Certification, and professional licensure;

2) Location information, including billing address and location of patient records;

3) Exclusion/sanction information;

4) Prior practice information;

5) Managing/directing employee information;

6) Ownership information;

7) Chain organization information;

8) Parent/joint venture/subsidiary information;

9) Contractor information;

10) Electronic submission information.

b) The Department shall process the application and conduct an initial certification inspection within 30 calendar days after receipt of the initial certification inspection fee.