**Section 515.5030 Request for Primary Stroke Center Designation**

a) *A hospital* that is already *certified as a Primary Stroke Center by a nationally recognized certifying body approved by the Department shall send a copy of the certificate and annual fee to the Department*, along with an application available through the Department*.* (Section 3.117(a)(2) of the Act)

b) *Within 30 business days* after the Department receives the hospital's certificate indicating that the hospital is a certified PSC *in good standing with the certifying body,* and the completed application available through the Department, the hospital *shall be deemed to be a State-designated PSC.* (Section 3.117(a)(2) and (4) of the Act)

c) The Department will send designation notices to hospitals that it designates and will *add the names of designated PSCs to the website listing immediately upon designation*. Subject to Section 515.5040, the Department will *remove the name* of a hospital from the website listing *when a hospital loses its designation after notice* and, if requested by the hospital, *a hearing*. (Section 3.118(c) of the Act)

d) The application available through the Department shall include a statement that the hospital meets the requirements for PSC designation in Section 3.117 of the Act. The applicant hospital shall provide the following:

1) Hospital name and address;

2) Hospital chief executive officer/administrator typed name and signature;

3) Hospital stroke medical director typed name and signature; and

4) Contact person typed name, e-mail address and phone number.

e) The application available through the Department will instruct the hospital to provide proof of current PSC certification from a nationally recognized certifying body approved by the Department.

f) A hospital designated as a PSC shall pay an annual fee of $350.

(Source: Amended at 40 Ill. Reg. 8274, effective June 3, 2016)