



CONNECTICUT DEPARTMENT OF PUBLIC HEALTH



Chronic & Convalescent Nursing Home License Renewal

Connecticut Regulation 19-13-~~DeF~~ are the requirements for Chronic and Convalescent Nursing Homes

- There are a total of **194** Chronic and Convalescent Nursing Homes licensed in Connecticut
- Licenses are renewed biannually
- Renewal notices are e-mailed approximately 120 days prior to expiration
- It is strongly recommended to use a generic e-mail account where multiple users can access (e.g. facilityadmin@ccnh.com)



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eLicense Portal Access

- Every facility has a user ID and password which is sent out with the renewal notice
- Renewal applications are completed utilizing the eLicense database
- Facilities have the ability to update contact information including the email of record
- Facilities can submit waiver requests through the "License Maintenance" tab
- A provider can request a verification letter through the eLicense system



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What documents are needed to renew a license?

- Malpractice and Public Liability Insurance
- Worker's Compensation Insurance
- Fire Marshal's Certificate of Inspection
- Organization Chart of Licensee and Real Property Owner
- Ownership forms of Licensee and Real Property Owner
- List of CNA's
- Total Number of Employees
- List of Officers and Directors
- List of Professional Staff
- Affidavit
- Copy of Lease
- Patient Capacity
- Services provided



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Key Management in Chronic & Convalescent Nursing Home

- Administrator
- Medical Director
- Director of Nurses



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Waivers

- C.G.S. Chapter 368v Sec. 19-495 (c) permits the commissioner to waive any regulations that would not endanger the health, safety, and welfare of patient or residents
- The facility must reapply for the waiver at the time of the renewal.
- Waiver applications are completed online via e license and must include the following:
 - The exact section of the Public Health Code you are applying for a waiver of
 - The reason/rationale for applying for the waiver
 - What specific relief is the facility seeking

Waiver Requests

1. Log into e License using the facilities User ID and Password



2. Select “License Maintenance”



Waiver Requests

3. Select “Start” and select “Request a Regulation waiver” from the drop down menu



License Status Change

Please select which credential you want to work on from the following list:

Home

License	
<input type="checkbox"/> CCH-00024 CHILD & ADULT NURSING HOME FACILITY LICENSING AND INVESTIGATIONS SECTION DEPARTMENT OF PUBLIC HEALTH	<input type="checkbox"/> GUILFORD HOME, LLC, THE NEW LAKE AVE GUILFORD, CT 06430

4. Complete all sections and select “submit”



Waiver Request Form

Please complete all required information.

1. Enter the name of the facility or organization you are requesting a waiver for.

2. Enter the address of the facility or organization.

3. Enter the phone number of the facility or organization.

4. Enter the email address of the facility or organization.

5. Enter the name of the person requesting the waiver.

6. Enter the title of the person requesting the waiver.

7. Enter the date of the request.

8. Enter the reason for the request.

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Changes that must be reported

CT DPH Regulations 19-13-D8T(5) require the following changes to be reported:

- Change of ownership
- Change in level of care
- Change in number of beds or location



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Changes that must be reported cont'd

CT DPH Regulations 19-13-D8T(6) require the following changes to be reported immediately and confirmed in writing within five days:

- Resignation or Removal of the Administrator
- Resignation or Removal of the Medical Director
- Resignation or Removal of the Director of Nurses