



TOMÁS J. ARAGÓN, MD, DrPH
Director and State Public Health Officer

State of California—Health and Human Services Agency California Department of Public Health



GAVIN NEWSOM
Governor

Primary Care Clinic (PCC) Frequently Asked Questions

Application Processing

1. What is the application review process for an Initial Primary Care Clinic license?

All Facilities Letter (AFL) 19-20 changed the way Centralized Applications Branch (CAB) receives and reviews applications. Applications that are missing forms and/or documents are deemed incomplete, and CAB will only process completed applications. Below is an overview of the application process for an Initial PCC license application:

When CAB receives an application and it is assigned to an analyst, the analyst will conduct a prescreen review. The analyst will identify if all required forms/documents/fees are submitted:

- If documents are missing, a “Request for Missing Forms/Documents” letter is emailed to the Application Contact, with a deadline of 21-calendar days.*
- Once all forms/documents have been received, a “Request for Application Packet Fee” letter is emailed to the Application Contact, with a deadline of 21-calendar days.*
- If CAB does not receive the requested forms, documents and/or fee within 21-calendar days of the date of the letter, the application will be deemed incomplete, and you will be required to resubmit your application.*

Once the application fee is received, the analyst will move to a full review of the application:

- Each form/document is reviewed for completion and accuracy, ensuring all information has been captured and to determine whether the facility meets state and federal requirements.*
- If any deficiencies have been identified, a “Correction Letter for Initial Licensure” letter is emailed to the Application Contact, with a deadline of 60-calendar days.*
- If CAB does not receive the requested corrections within 60-calendar days of the date of the letter, the application will be denied.*

Once the analyst receives the corrections and completes the review, they will proceed to approve the application. The application will be sent to the district office (DO), who will contact the provider to schedule a survey. Once the survey has been completed and approved, CAB will be notified to issue an electronic State license.

2. What is the application review process for an Initial PCC – Affiliate license?

Below is an overview of the application process for an Initial PCC – Affiliate license application:

When CAB receives an application and it is assigned to an analyst, the analyst will conduct a full review of the application:

- The analyst identifies if all required forms/documents are submitted, if each form/document is complete and accurate, and determines whether the clinic meets state and federal requirements.*
- If any missing forms/documents and/or deficiencies have been identified, a “Correction Letter for Initial Licensure” letter is emailed to the Application Contact, with a deadline of 60-calendar days.*
- If CAB does not receive the requested forms, documents and/or corrections within 60-calendar days of the date of the letter, the application will be deemed incomplete, and you will be required to resubmit your application.*

Once the analyst receives missing forms/documents and/or corrections, the analyst will request the application fee:

- The analyst will email a “Request for Application Packet Fee” to receive the application fee, with a deadline of 21-calendar days.*
- If CAB does not receive the requested fee within 21-calendar days of the date of the letter, the application will be deemed incomplete, and you will be required to resubmit your application.*

Once the application fee is received and cleared, the analyst will proceed to approve the application and issue the electronic state license.

3. How can I ensure that my Initial application is processed timely?

Applications that are missing forms/documents are deemed incomplete, and CAB will only process completed applications. Please ensure the following are completed:

- Ensure all required forms/documents are submitted to avoid processing delays.*
- Ensure all applicable fields on each form/document are completed.*
- For visual instructional assistance on how to complete specific forms, such as the HS 215A and a variety of Medi-Cal certification documents, please review the video tutorials available on the [Licensing and Certification Program website](#).*

4. How can I check the status of my application?

When the application is assigned to an analyst, you will be able to contact the analyst directly. If you have not received a response, please email the NLTC inbox at CABNLTC@cdph.ca.gov for any questions and inquiries regarding submitted applications.

5. Can I contact our local DO to find out the status of an onsite survey?

Yes, providers may contact their local DO to inquire the status of a pending survey.

Please reference your application ID and your facility license number (if applicable) when contacting your [local DO](#).

6. Do I mail a completed application to CAB, or email a digital file to the CAB inbox?

Pursuant to Health and Safety Code (HSC) § 1212(a), anyone desiring a license for a clinic shall file with the department a verified application on forms prescribed and furnished by the department. Once all forms for the application are ready, please mail the application directly to CAB.

*California Department of Public Health
Licensing and Certification Program
Centralized Applications Branch
P.O. Box 997377, MS 3207
Sacramento, CA 95899-7377*

Do not send any completed application packets, forms, or supporting documents to the local DO.

7. Do I need to submit application documents with original signatures?

CAB can accept documents submitted through mail with original signatures, PDF electronic signatures in lieu of original signatures, and/or copies of original signatures that are submitted as PDFs.

8. Can PCCs submit an application before construction is complete?

CAB does not accept applications where construction has not been finalized and a certificate of occupancy cannot be provided. CAB will require a permanent certificate of occupancy (COO) to verify the facility meets building code requirements. If a COO is not provided, the analyst will recommend the provider withdraw the application and resubmit when the COO is obtained.

9. Can I begin seeing patients once CAB approves my Initial application?

No, CAB application approval does not equal license approval. You cannot begin seeing patients until your local DO conducts and completes their licensing survey. PCC – Affiliates are the exception, pursuant to HSC § 1218.1(d). Once CAB approves the application for an Initial PCC-Affiliate license, the state license will be issued.

Forms/Documents

10. Can I submit aged HS 215As with my application submissions?

The date of the HS 215A form should be within the last three months.

11. Why does CAB require a CDPH 270 be signed by a California licensed architect or local building authority?

Pursuant to HSC § 1226(c), the construction or alteration of buildings shall be reviewed by the city or county, and the latest edition of the California Building Standards Code shall be applied in conducting these plan review responsibilities. The space occupying the facility needs to be reviewed.

To obtain the latest version of the form, please visit:

<https://www.cdph.ca.gov/CDPH%20Document%20Library/ControlledForms/cdph270.pdf>

12. Does the CDPH 270 need to cover the whole two-complex buildings, or only the space that we will occupy as our PCC?

The CDPH 270 must cover the space that the PCC will occupy.

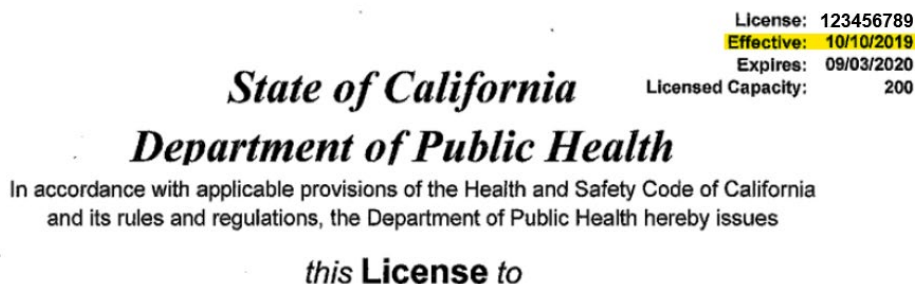
13. What can I do if the fire inspector will only accept a fire safety inspection request from the California Department of Public Health (CDPH)?

A fire safety inspection request (STD 850) should be obtained prior to submitting an application or change request. You may provide a [pre-populated STD 850](#) and [cover letter](#) (see attachment) to your local fire authority to initiate the fire safety inspection request. If the fire inspector will only accept fire safety requests from CDPH, CAB may request the inspection on behalf of the provider. However, the provider must follow up with the status of the inspection with the local fire authority. To assist the analyst in initiating the request, provide a document with your application that lists the contact information for both the fire inspector and the facility representative that will coordinate with the local fire authority. Licensure will not be granted until the facility passes fire inspection.

Licensing

14. What does the license effective date represent?

The effective date represents the date of Initial licensure or the date a change was made to the license. This date is located in the top right corner, above the license expiration date. Pursuant to HSC § 1215, a license shall expire 12 months from the date of its issuance.



15. How can I obtain a duplicate of my license?

A duplicate license can be mailed to a Licensee, Administrator, or any other “Active” entity related to the facility and previously filed in the CAB’s ELMS database. For all others requesting a duplicate license, please submit a [PRA Request](#). Please note that licenses emailed via PRA request will have a “COPY” watermark on the PDF License.

16. I have not received the second provisional license. How do I inquire about receiving my provisional or permanent license?

All clinics, with the exception of PCC – Affiliate clinics, will receive two provisional licenses from the CAB Licensing Unit, pursuant to HSC § 1219. Contact our CAB Licensing Unit at CABLicensing@cdph.ca.gov for questions regarding your license.

17. Do PCC – Affiliates receive a provisional or permanent license?

PCC - Affiliates will receive a permanent license upon CAB approval of the affiliate application.

18. What are the licensure requirements for an ambulatory infusion center?

CDPH does not license ambulatory infusion centers. A PCC can provide infusion services if the clinic is organized, staffed, and equipped to do so, pursuant to Title 22 California Code of Regulations (CCR) § 75026.

19. Is an urgent care facility required to be licensed?

An urgent care facility is required to be licensed;

- If the urgent care facility is an outpatient service of a General Acute Care Hospital (GACH).*
- If the urgent care facility is a non-profit, tax-exempt PCC.*
- The urgent care facility may be exempt from licensure if they meet criteria in HSC § 1206.*

20. What is the process for a renewal license?

Pursuant to HSC § 1215, a license shall expire 12-months from the date of its issuance. The license renewal invoice/license renewal application (LRA) is distributed 120 days prior to the license expiration date. To receive a renewed license, both the license renewal fee and LRA must be submitted to CDPH. Visit the CDPH website for detailed instructions at <https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/ApplyForLicensure-Renewals.aspx>

For license renewal questions, please contact CABLicensing@cdph.ca.gov.

Certification

21. How can I verify if my clinic is actively enrolled with Medi-Cal?

PCC providers may check their certification status by going to the Provider Enrollment Division (PED) webpage on the Department of Health Care Services (DHCS) website and completing an Inquiry Form (found under Provider Resources). https://www.dhcs.ca.gov/provgovpart/Documents/PAVE_Project_for_Provider_Enrollment_Division/Provider-Enrollment-Contact-List.pdf

22. How do I resolve billing issues with Medi-Cal?

CAB collects Medi-Cal certification documents for initial enrollment, and changes in NPI, location, and facility or licensee name of the Medi-Cal recipient. CAB collects the completed certification forms with the application packet and forwards the packet to the facility's DO in order for the process to be completed between the DO and the DHCS, PED. When transference occurs, CAB will notify the provider and provide contact information to the facility's local DO. To resolve common billing issues, please visit the PED webpage on the [DHCS website](#) and complete an Inquiry Form (found under Provider Resources).

If a clinic is exempt from licensure under HSC § 1206 and is seeking Medi-Cal certification, please apply directly to the DHCS, PED. Please contact the PED directly and submit an application requesting Medi-Cal as an exempt from licensure facility.

Affiliate Clinics

23. What type of application qualifies for the 30-day timeline review?

An Initial PCC - Affiliate application and change of location application for a PCC - Affiliate. Pursuant to HSC § 1218.1(d), the department shall issue a clinic license under this section within 30 days of receipt of a completed affiliate clinic application. If approved, a clinic license shall be issued within seven days of approval. If the department determines that an applicant does not meet the conditions stated in subdivision (a), it shall identify, in writing and with particularity, the grounds for that determination, and shall instead process the application in accordance with the time specified in section 1218.

24. Can a licensed PCC – Affiliate facility be a parent clinic to another PCC – Affiliate facility?

Yes, if the clinic meets the requirements outlined under HSC § 1218.1 to be a parent clinic for a PCC – Affiliate facility.

25. What is the difference between licensure for a PCC – Affiliate facility and a PCC – consolidated facility?

A PCC - Affiliate is licensed under a clinic corporation on behalf of a PCC that has held a valid, unrevoked, and unsuspended license for at least the immediately preceding five years, with no demonstrated history of repeated or uncorrected violations of any regulations that pose immediate jeopardy to a patient, and that has no pending action to suspend or revoke its license, may file an affiliate clinic application to establish a PCC at an additional site or a mobile health care unit, pursuant to HSC § 1218.1. The clinic corporation (parent clinic) that operates the existing licensed PCC may file an affiliate clinic application if all the following conditions are met:

- the corporate officers are the same;*
- are owned and operated by the same nonprofit organization with the same board of directors; and,*
- have the same medical director or directors and medical policies, procedures, protocols, and standards.*

A consolidated license means allowing eligible PCCs or affiliate clinics to add additional physical plants, maintained and operated on separate premises, to an existing PCC or affiliate clinic site. The PCC or affiliate clinic license shall be amended to include the additional physical plant as part of a single consolidated license. A PCC or affiliate clinic may add additional locations that are no more than one-half mile from the licensed clinic adding the additional physical plant under the consolidated license. The clinic corporation that operates the existing licensed PCC shall demonstrate compliance with the following criteria:

- there is a single governing body for all the facilities maintained and operated by the licensee;*
- there is a single administration for all the facilities maintained and operated by the licensee; and,*
- there is a single medical director for all the facilities maintained and operated by the licensee, with a single set of bylaws, rules, and regulations.*

Consolidated Clinics

26. Is a licensing fee required for an Initial PCC – consolidated application?

Yes. Pursuant to HSC § 1212(d)(1), a licensing fee is required for each additional physical plant added as part of a single consolidated license of a PCC or an affiliate clinic.

27. Am I required to pay a licensing fee for each of my consolidated clinics at time of renewal?

Yes. Pursuant to HSC § 1212(d)(6), upon renewal of a consolidated license approved pursuant to this subdivision, a licensee fee shall be required for each additional physical plant approved on the license.

Mobile Units

28. Can an established mobile unit provide services in another county?

Pursuant to HSC § 1765.130(b)(4), the applicant shall specifically state in their application the proposed area or areas where the mobile unit will be providing services and will be licensed for these areas, including other counties. Prior to granting approval to an applicant parent facility for operation of a mobile unit under the parent facility's existing licensure, or prior to granting license for an independent mobile unit, the state department shall conduct an onsite inspection, including, but not limited to, a review of policies and procedures.

29. In addition to the state PCC – mobile license, would a licensed mobile medical unit also need to obtain approvals from each town and municipality where the unit operates?

Yes. Refer to HSC § 1765.150(e) and 1765.155(a) for PCC – mobile requirements. Pursuant to HSC § 1765.130(b)(4), the applicant shall specifically state in their application the proposed area or areas where the mobile unit will be providing services and will be licensed for these areas, including other counties. A Planning and Zoning approval is required for each different county where the mobile clinic will operate.

30. What information do I need to enter on the STD 850 form for an Initial PCC – mobile application?

Provide the following information below on the STD 850 – Fire Safety Inspection Request form:

- **Capacity** – Ambulatory, non-ambulatory, and bedridden (if applicable)
- **Total Capacity**
- **Facility Name** – Name of mobile unit
- **Street Address** – Location of the mobile unit when it is not in use and parked overnight
- **License Category** – Primary Care Clinic – Mobile
- **Facility Contact Person Name/Telephone Number**
- **Hours** – Hours of operation when conducting services

You may provide a [pre-populated STD 850](#) and [cover letter](#) (see hyperlink) to your local fire authority to initiate the fire safety inspection request.

If the STD 850 form is not required for a particular mobile clinic, a written statement from the local fire agency must be submitted.

31. Is an STD 850 – Fire Safety Inspection Request form required for an Initial PCC – Affiliate license application?

Yes, it is required.

32. How does one obtain Housing and Community Development (HCD) inspection approval or insignia?

Visit the [HCD Permits & Inspection](#) page for instructions on how to complete the HCD 415 application in order to receive your inspection and obtain the HCD insignia. For further assistance regarding the HCD inspection process, contact:

- *the Northern Area Field Office (covers from Fresno County and northward) at NAOStaff@hcd.ca.gov.*
- *the Southern Area Field Office (covers remainder of Southern CA) at SAOStaff@hcd.ca.gov.*
- *You may also reach HCD at ContactMH-FBH@hcd.ca.gov and one of their analysts will respond.*

33. Why is the Housing and Community Development inspection required?

Pursuant to HSC § 1765.120, “compliance with all of the following criteria shall be required prior to licensure:

- (a) The mobile unit shall comply with the applicable requirements of the Vehicle Code and shall have a vehicle identification number.*
- (b) The mobile unit shall bear an insignia issued by the Department of Housing and Community Development pursuant to § 18026”.*

Mental Health Facilities

34. Do inpatient mental health facilities qualify as a PCC?

No, inpatient mental health facilities do not qualify as a PCC pursuant to HSC § 1200(a). The DHCS Mental Health Licensing (MHL) and Certification is responsible for the licensing and oversight of mental health programs on a statewide basis, ranging from acute to long-term programs. For more information, visit their [website](#).

Report of Changes

35. What Report of Change (ROC) applications for clinics does CAB accept?

Primary Care Clinic ROCs:

- *Change of Administrator (CHOA)*
- *Change of Governing Board (CHGB)*
- *Change of Location (CHOL)*
- *Change of Mailing Address (CHMA)*
- *Change of Medical Director (CHMD)*
- *Change of Name (CHON)*
- *Change of National Provider Identified (CNPI)*
- *Change of Property Owner (CHPO)*
- *Change of Services (CHOS)*

Intermittent Clinic ROCs:

- *PCC Conversion to Intermittent Clinic*

Please visit the [Licensing and Certification Program website](#) for provider instructions and checklists, sample applications, and application packets for your facility type.

36. My facility did not move to a new location, but changes were made to the address (i.e., removal or addition of a suite number). Do I need to submit a CHOL application?

Yes, when there is a change in address, the Department requires an application to substantiate that change. Please visit the [Licensing and Certification Program website](#), select the facility's Primary Care Clinic type, and select the "Change of Location (CHOL)" dropdown for further instruction.

37. How can I add a service to my PCC license?

To report a CHOS, you must complete the required application packet. Please visit the [Licensing and Certification Program website](#), select the facility's Primary Care Clinic type, and select the "Change of Service (CHOS)" dropdown for further instructions.

38. Can a satellite clinic (i.e., intermittent, intermittent mobile, consolidated clinic) offer different services than those approved under the licensed parent clinic?

No, if the parent clinic intends to offer a service at a satellite clinic, the service must be approved on the parent clinic license. To add a service to the parent clinic license, the parent clinic must submit a CHOS application. Please visit the [Licensing and Certification Program website](#), select the facility's Primary Care Clinic type, and select the "Change of Service (CHOS)" dropdown for further instructions.

39. My CHOL application is pending a licensing survey with the local DO. Can we treat patients at the new location prior to the completion of the licensing survey?

No, a facility cannot operate at the new location until the local DO approves the licensing survey and communicates that approval to CAB.

40. Will there be an onsite survey when adding services to our PCC license?

As a guideline, an onsite survey is required if construction occurred. Be advised that when submitting a request to add a basic service where construction did not occur, the clinic shall notify the Department, in writing, of the change no less than 60 days prior to adding the service. In this instance, it is at the discretion of the local DO if the Department will perform an onsite survey.

Pursuant to HSC § 1212(b)(1), no application is required if a licensed PCC adds a service that is not a special service, as defined in section 1203, or any regulation adopted under that section, or remodels or modifies, or adds an additional physical plant maintained and operated on separate premises to, an existing PCC site. However, the clinic shall notify the department, in writing, of the change in service or physical plant no less than 60 days prior to adding the service or remodeling or modifying, or adding an additional physical plant maintained and operated on a separate premises to, an existing PCC site.

41. I received a LRA, and it indicates no record found under the facility information section. How do I properly update my facility information?

If the LRA indicates ‘no record found’ under the facility information or you identify discrepancies (i.e., administrator, medical director, NPI, mailing address, etc.), please submit a complete ROC application along with the LRA. Please visit the [Licensing and Certification Program website](#), select the facility’s Primary Care Clinic type, and select the appropriate change from the dropdown menu for further instruction.

42. I received a “LRA Report of Change Notification,” however there were no changes to the facility information. Why am I receiving a notification to submit a ROC application to CAB?

If a provider uses the LRA to disclose updated information, the analyst will verify if this information is current in the Department’s database. If not, the analyst sends the provider a notification to submit the appropriate ROC application.

Intermittent Clinics

43. Is the STD 850 required when submitting an intermittent notification request?

CAB does not require an STD 850 be submitted with an intermittent clinic notification. However, pursuant to HSC § 1206(h), it is the responsibility of the provider to maintain compliance with fire and life safety requirements. CAB recommends keeping a record of the intermittent clinic’s fire safety inspection clearance available in the facility.

44. I have established an intermittent clinic with DHCS/PED. When do I need to report the intermittent clinic to CAB?

Pursuant to HSC § 1218.4, a licensed primary care community or free clinic shall report to the department, when renewing its license, whether it is currently operating an intermittent clinic, the location of any intermittent clinic, and the estimated hours of operation of any intermittent clinic. Please review your LRA to confirm if all intermittent clinics operating under the licensed PCC are accurately reported to CDPH. If you notice that an intermittent clinic is not listed on the LRA, you must send a written notification to CDPH if the intermittent clinic is already established with DHCS/PED but not in CDPH's system.

To report an intermittent clinic, you must complete the required written notification. Please visit the [Licensing and Certification Program website](#), select the facility's Primary Care Clinic – Intermittent clinic type, and select the "Initial Application" dropdown for further instructions.

45. How do I report the closure of an intermittent clinic?

CAB requires a signed letter on company letterhead with a brief description of the request and the following information:

Parent Clinic:

- *Licensee*
- *License number*
- *Parent clinic physical address*
- *Parent clinic name*
- *Facility number (if known)*
- *Contact information (name, title, phone number, and email address)*

Intermittent Clinic:

- *Intermittent clinic name*
- *Intermittent clinic physical address*
- *Contact information (name, title, phone number, and email address)*
- *Reason for closure and effective date of closure*
- *Attach a copy of the public notice with closure date*

Submit the complete closure notification to:

*California Department of Public Health
Licensing and Certification Program
Centralized Applications Branch
P.O. Box 997377, MS 3207
Sacramento, CA 95899-7377*

46. What is the process for converting an intermittent clinic to a licensed PCC?

Intermittent clinic to licensed PCC conversion requests require an Initial licensure/certification application. If an intermittent clinic is requesting conversion to a PCC, the intermittent clinic may continue operation while going through the Initial application. These applications are processed by the Non-Long Term Care Clinic Unit. Once the application is reviewed for completeness, it is sent to the local district DO for a survey.

To report an Initial application, you must complete the required application packet. Please visit the [Licensing and Certification Program website](#), select the facility's Primary Care Clinic type, and select the "Initial Application" dropdown for further instructions.

47. What is the process for converting a licensed PCC to an intermittent clinic and who should I notify first, CAB or DHCS?

If a licensed PCC wishes to convert to an intermittent clinic, a written notification must be submitted to CAB. The written notification must include the information of the PCC converting to an intermittent, information of newly intermittent clinic and information of proposed parent clinic. Once CAB completes review of the notification, the analyst will notify the provider via an approval letter.

To request a licensed PCC conversion to an intermittent, you must submit a written notification. Please visit the [Licensing and Certification Program website](#), select the facility's Primary Care Clinic – Intermittent clinic type, and select the "Conversion" dropdown for further instructions.

General

48. What are the basic requirements to be licensed as a PCC?

A PCC must be a tax-exempt, nonprofit corporation. Pursuant to HSC § 1204(a)(1)(A), in a community clinic, any charges to the patient shall be based on the patient's ability to pay, utilizing a sliding fee scale. Pursuant to HSC § 1204(a)(1)(B), in a free clinic, there shall be no charges directly to the patient for services rendered or for any drugs, medicines, appliances or apparatuses furnished.

49. Where can I find the most current fee schedule for Initial licensure, change of ownership (CHOW), and LRAs?

Visit our [L&C Health Care Facility Licensing Fees](#) page for the list of all facility types and associated fee amounts. Facilities located in Los Angeles County are subject to pay an additional supplemental fee.

50. Do I need to have a physical building in order to apply for PCC licensure if I am currently operating via telehealth?

Yes. According to HSC § 1226(a) in order to apply for PCC licensure through CAB, a physical plant and control of property documentation are required. If patients are not seen in a physical building, the entity is not eligible for state licensure.

51. How do I determine if my clinic is exempt from licensure?

If a clinic meets exempt from licensure requirements pursuant to HSC § 1206, they must apply to the DHCS' Provider Enrollment through Provider Application and Validation for Enrollment (PAVE). For more information, visit [DHCS' Exempt from Licensure Clinic Application Information](#). For questions regarding PAVE, contact PAVE@dhcs.ca.gov.

52. How does the PCC, Program of All-Inclusive Care for the Elderly (PACE), facility licensing exemption work?

As stated on the [AFL 21-03](#), effective January 1, 2021, [AB 1128](#) exempts PCCs that exclusively serve PACE participants, or that serves individuals being assessed for PACE program eligibility for not more than 60-calendar days after an individual applies for enrollment, from CDPH licensure. The DHCS fully assumes responsibility for license- exempt PACE facilities. If DHCS determines that a license-exempt PACE facility has provided services to individuals who are not PACE participants or provided assessment services to prospective enrollees beyond a timeframe of 60-calendar days, the facility will be required to apply for licensure with CDPH within 60-calendar days of DHCS' determination and cease accepting new participants until licensure is obtained.

For questions concerning exemption from licensure for PACE facilities, please contact the appropriate local [CDPH Licensing and Certification DO](#) or the [DHCS Integrated Systems of Care Division's PACE Unit](#).

53. Is there a maximum timeframe that a clinic can be temporarily closed without having to terminate the license?

Pursuant to HSC § 1245, any licensee or holder of a special permit may, with the approval of the state department, surrender their license or special permit for suspension by the state department for a temporary period not to exceed 24 consecutive months. Any license or special permit suspended may be reinstated by the state department on receipt of an application and after an inspection showing full compliance with all applicable licensing requirements. While the license is suspended, the licensee must continue to pay the annual license renewal fee accompanied with the license renewal application to maintain the license as active.

54. What is the difference between a facility and licensee?

The facility is the location requesting licensure. The licensee is the organization operating the facility.

Cover Letter to Accompany STD 850

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TOMÁS J. ARAGÓN, MD, DrPH
Director and State Public Health Officer

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

TO: Fire Authorities in the State of California

FROM: Centralized Applications Branch
Licensing & Certification Program
California Department of Public Health

RE: Fire Safety Inspection Request (Form STD 850)

The Licensing & Certification (L&C) Program requires health care providers seeking licensure as a primary care clinic to obtain verification by an initial fire clearance that the clinic is in compliance with the rules and regulations of the State Fire Marshal.

L&C requires health care providers to submit documentation that the clinic is in compliance with local fire authority requirements when submitting their application for licensure to the Centralized Applications Branch (CAB). For this reason, we are requesting that the following be completed by the local fire authority and returned to the health care provider in order for them to include this documentation in their application for licensure.

- Form STD 850, approved and signed by the fire authority, or
- Similar form which contains equivalent information, approved and signed by the fire authority.

Please Note: L&C will accept forms initiated by the health care provider and approved and signed by the fire authority.

If you have any questions regarding this process, please contact CAB at (916) 552-8632 or by email at CAB@cdph.ca.gov.

Thank you for your assistance.

