

SHARED LICENSE RENEWALS – STEP-BY-STEP GUIDE

- Only renew those locations where you are still the **Director of Record**. If you have ended employment or are no longer serving as the person responsible for the day-to-day operations, **do NOT renew** those licenses.
- Complete the end dates in each location license card you are no longer serving as the Director of Record by clicking “More” in the upper right-hand corner.

STEP 1: Click on MORE (shown by arrow) of the License – Assisted Living Director (ALD) Card. Do this for each License – Shared Assisted Living Director (SA) card.

The screenshot displays a grid of license cards. The top row includes a 'GENERAL' card on the left, a 'LICENSE - NURSING HOME ADMIN (NHA)' card in the middle, and a 'LICENSE - ASSISTED LIVING DIRECTOR (ALD)' card on the right. The bottom row consists of three 'LICENSE - SHARED ASSISTED LIVING DIRECTOR (SA)' cards. Each card shows fields for NUMBER, STATUS, ISSUED, EXPIRES, CE DUE, and ADDRESS. The ALD card has a 'Renew' button in its right-hand column, which is highlighted by a red arrow. Another red arrow points to the 'More' button in the top right corner of the ALD card.

STEP 2: When all License Cards are accurate. Click RENEW (shown by arrow). Begin with the main initial license card. You will need to do this for each license card – Shared Assisted Living Director (SA).

STEP 3: Read the Tennessee Warning carefully and acknowledge when complete. Click NEXT.

1 Tennessee Warning

The Minnesota Board of Executives for Long Term Services and Supports is seeking data from you which may be considered private or confidential under the Minnesota Government Data Practices Act, Minn. Stat. § 13.01 et seq. Minn. Stat. § 13.04, subd. 2 requires the Board to notify you of the following four matters before you are asked to supply such information about yourself: (1) This data is being collected to determine whether you meet the requirements for renewal of your license as well as whether you have violated any statutes or rules the Board is empowered to enforce; (2) You are not legally required to complete and return this renewal application, but failure to do so may result in the denial of this licensure renewal application; (3) If you supply the data requested and it shows a violation of any of the statutes or rules enforced by the Board, you may be subject to disciplinary or other action by the Board.

If you refuse to supply the data requested, your licensure renewal application may be denied. In addition, falsification or omission of information may be used by the Board as a basis for disciplinary action; and (4) the data which you supply will be accessible to Board staff. The data you supply may also be released to other persons and/or governmental entities that have statutory authority to review the data, investigate specific conduct, and/or take appropriate legal action. If the Board institutes a formal disciplinary action against you, the information you supply could become public.

ACKNOWLEDGMENT

By checking here you agree to the above Tennessee warning

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STEP 4: If you still are the Director of Record, be sure the license is accurate for this location. Click NEXT.


**** If you no longer serve as the Director of Record for this location, indicate the date you stopped as the Director of Record. Do Not Renew this license. You may return to the home page.**

2 Employment

If you are no longer serving as the *Director of Record* for this location, click on the blue pencil and choose the date you ended as the DOR. Do not renew this license. Stop this renewal and proceed to the home page.

Leave the end date open if you are still the *Director of Record* for this location.

EMPLOYMENT

LICENSE	EMPLOYER	HFID	POSITION	START	END	
			Director of Record (ALD-Shared)	06/01/2022	-	

Include Historic

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STEP 5: If you are still renewing this license, proceed with answering practice questions. READ CAREFULLY. Question #6 you may be required to furnish a separate management agreement. This may be requested by the BELTSS board AFTER renewals.

3 Answer Practice Questions

- 1 Since your shared license was issued has there been a change in the MDH facility license legal name or the name in which the facility does business as (DBA)? If yes, please explain. No

- 2 Since your shared licensed was issued has there been any change to the total resident capacity at this entity? If yes, please explain. No

- 3 Since the shared license was issued has there been a regulatory survey at this entity? No

- 4 Has this facility received a regulatory survey result in a level 3 or 4 violation, and/or was the facility placed on a conditional license? If yes, please explain. If you have not be surveyed by MDH you may chose the answer "No". No

- 5 The entities in which I am the Director of Record are within a 60-mile radius from the farthest two locations? If no, you may not continue this renewal. Please call the Board office. Yes

- 6 Since the shared license was issued the entity shares common ownership and/or management of each facility I am the Director of Record? If no, you may not continue this renewal. Please call the office. a. Ownership: An individual or legal entity that has director or indirect ownership interest of five percent or more in a licensee (facility). b. Management: An individual or legal entity designated by the licensee (facility) through a written, executed management agreement. Yes

- 7 I understand as the Director of Record I must maintain on-site presence to administer, manage and supervise each facility, per Minnesota Rules 6400.7085? Yes

- 8 I understand it is my responsibility to update my Director of Record when I am no longer the LALD of the entity Yes

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STEP 6: Each license requires a license renewal fee of \$150.00 per license.

All US Bank Service fees will be the responsibility of the card holder effective July 1, 2023. Service fees are non-refundable.

Payment Information	Amount
Shared Director (ALD)	\$150.00
Total Amount	\$150.00

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STEP 7: Read through the Affidavits carefully and acknowledge by checking the boxes below. If you have more shared license cards to renew, click on “ADD TO CART” and continue shopping. Continue STEPS 2 – 6.

If you have updated and renewed ALL licenses, click on “Proceed to Checkout”. This will allow you to review your total shopping cart and the amounts owed.

5 ✓ Review

Please review all the information entered on your renewal application. Your answers can be viewed by clicking on the 'Confirmation' icon below.
If any information is incorrect in the confirmation document, return to the appropriate step to correct it. You can return to the previous step by clicking the 'Previous' button.

Note: Do not use the Back button on your browser to return to a previous page.

TYPE Shared Assisted Living Director
REFERENCE # SA1360-34035

[Download Confirmation](#)

ACKNOWLEDGMENT

If all information is correct then affirm the statements below and continue.

General Affidavits
I hereby affirm that I have read, understand and agree to the following:

- That the information submitted in this renewal application may be used as the basis for further investigation by the Board, and under some circumstances, the information could become available to other agencies or persons authorized by law to have access.
- Since the date of my last renewal application filed with the Board the answers given in this application are true and correct.
- I agree to abide by the laws of the State of Minnesota concerning the practice for which I am renewing the License.
- I understand that failure to disclose any of the requested information may result in the denial of this application for renewal.
- I understand that should I desire to change the status of my license, I must obtain the appropriate application form by contacting the Board office.
- I agree that I will cooperate with any necessary investigation or inquiry initiated by the Board, according to Minnesota Rules Chapter 6400 and that failure to answer a question truthfully may be grounds for discipline and/or termination of my License renewal pursuant to [Minnesota Administrative Rules Chapter 6400](#).

Director/Administrator of Record Employment Affidavits

I agree that I have reviewed the accuracy of the Director/Administrator of Record employment and agree to update any changes within **five working days** and that failure to do so may be grounds for disciplinary action under [Minnesota Administrative Rules Chapter 6400](#).

[Add to Cart and Continue Shopping](#) [Previous](#) [Proceed To Checkout](#)

STEP 8: Review your Cart. If multiple licenses, you will see each renewal listed with the license number.

YOUR CART

ITEMS READY FOR PAYMENT

Description	Amount
Renewal - [REDACTED]	\$150.00
Grand Total	\$150.00

[Proceed to Payment](#)

If you have two (2) total licenses the fee will be \$300, if you have three (3) total licenses the fee will be \$450, if you have four (4) total licenses the fee will be \$600 and five (5) total licenses the fee will be \$750.

STEP 9: Complete the Payment Section. A receipt will be emailed to your email address on File. When you have completed all the information, click the RED continue button below.

Make a Payment

My Payment

Minnesota BELTSS

Amount Due \$150.00

Application Description Assisted Living Director Renewal

License Description AL

License Number [REDACTED]

Payment Information

Frequency One Time

Payment Amount \$150.00

Payment Date Pay Now

Contact Information

First Name

Last Name

Company (Optional)

Address 1

Address 2 (Optional)

City/Town

State/Province/Region

Zip/Postal Code


Country

Phone Number

Email Address

[Become a Registered User](#)

Payment Method

Card Number 


Expiration Date Month Year


Card Security Code

Card Billing Address Use my contact information address
 Use a different address

A service fee will be charged for this transaction. This fee amount will display on the next page where you will be able to cancel or confirm your payment.

Continue [Cancel](#)

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