

## MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES DIVISION OF REGULATION AND LICENSURE SECTION FOR LONG-TERM CARE

NURSING HOME SURETY BOND

SEE INSTRUCTIONS ON REVERSE

BOND NUMBER LEVELS OF CAR		DEL MONOGNONO ON NEVENOL
KNOW ALL MEN BY THESE PRESENTS, that we,	(OPERATORIO NAME)	
of	(OPERATOR'S NAME)	
(FACILI	ITY NAME AND ADDRESS)	
as Principal, and(SURETY)	, a corporation organized and ex	isting under the laws of the
	d to transact surety business in the State of Misso	ouri, as Surety, are held and
firmly bound unto the State of Missouri, for the use and bene	efit of injured persons in the aggregate penalty of	
for which payment well and truly to be made we bind oursel severally, firmly by these presents.	al of	
WHEREAS, the said Principal will be holding in trust mo provisions of the Omnibus Nursing Home Act (Section 198.0		comply with the applicable
NOW, THEREFORE, THE CONDITION OF THE ABOVE Of 198.090 and 198.096, RSMo and any amendments thereto, the estate of a former resident, through act(s) of the operato obligation shall be null and void, otherwise to remain in full for	and in particular shall not wrongfully deprive a reprogram affiliate or employee of the operator, of m	esident or former resident or
Provided, that any person having a claim against said Rring may bring suit on this bond in any court of competent jurisdictions.		98.096, RSMo Supp. 1988,
Provided further, that if the Surety shall so elect this bond Department of Health and Senior Services, with a copy to the sixty (60) days; but said Surety shall not be discharged hereunder before the expiration of said sixty (60) day pend.	e Principal, and this bond shall be deemed cance from any liability already incurred under this b	lled at the expiration of said
This bond shall be continuous until cancelled.  This bond shall be effective as of the date signed.		
IN WITNESS WHEREOF, the said Frincipal and the said Surety have affixed their hands and seals on this day of,		
SURETY	PRINCIPAL	
NAME	NAME	
ADDRESS	ADDRESS	
Attorney in Fact	SIGNATURE OF OPERATOR, PARTNER OR CORPORATE OFFICER OF BUSINESS	
ВУ	ВУ	
INSURANCE AGENT NAME (NO SIGNATURE REQUIRED)	TITLE	
ADDRESS		TELEPHONE

## NURSING HOME SURETY BOND

## **INSTRUCTIONS**

Missouri law, Section 198.096, RSMo, requires all operators of facilities who hold in trust personal funds of residents as provided by Section 198.090 RSMo to obtain and file a Nursing Home Surety Bond or a Noncancelable Escrow Agreement with the Missouri Department of Health and Senior Services.

- 1. A surety bond must be in a form approved by the Missouri Department of Health and Senior Services. (Section for Long-Term Care will furnish forms)
- 2. A surety bond must be issued by an insurance company licensed for bonding with the State of Missouri.
- 3. A surety bond must have a number for reference.
- 4. A surety bond must bear an effective date.
- 5. A surety bond must be signed by the attorney in fact and a person having authority to sign for the entity
- 6. A surety bond must be accompanied by a power of attorney letter
- 7. A surety bond must be an original; it may not be a copy:
- 8. The principal as indicated on the bond must be identical to the licensed operator as appears on the Missouri Department of Health and Senior Services license to operate a long-term care facility and as registered with the Missouri Office of Secretary of State.
- 9. A surety bond must be at least \$1,000.
- 10. A surety bond may cover more than one licensed facility operated by the same operator if the facility is a multi-licensed facility on the same premises. You must indicate what licensed levels the bond is covering.
- 11. A surety bond may cover other licensed facilities operated by the same operator which are at other locations in Missouri provided the bond specifies the amount of coverage provided for each individual facility and the coverage for each facility is a minimum of \$1,000.
- 12. If a surety bond includes a provision allowing the surety to cancel after notice, the Missouri Department of Health and Senior Services must be notified at least sixty (60) days prior to cancellation. The notice must be sent to:

Accountants
Section for Long-Term Care
Division of Regulation and Licensure
Missour Department of Health and Senior Services
P.O. Box 570
Jefferson City, MO 65102-0570

All surety bonds are to be sent to the address above for approval.

MO 580-2624 (7-06) DA-638