

CONTROLLED SUBSTANCE RENEWAL CHECKLIST

***** IMPORTANT NEW INFORMATION *****

_____ Renewal application(s) for the **Agent and Agency** must be submitted.

<https://www.health.ny.gov/forms/doh-3826.pdf>

<https://www.health.ny.gov/forms/doh-3827.pdf>

_____ If the previously submitted plan remains in full effect with no changes, a written statement indicating the plan has been recently reviewed and remains in effect. Please indicate the review date.

If changes need to be made to the plan, the changes must be detailed, in writing, and a copy of the revised plan must be provided. This revised plan will need to be approved PRIOR to implementation of the proposed changes. This includes any proposed form changes.

_____ An updated copy of the agreement with the controlled substance vendor. A recently signed agreement, valid for the duration of the license, must be submitted.

_____ If the agreement has an automatic renewal clause, a statement from the vendor stating the agreement remains in full effect can be submitted in place of the copy of the agreement.

_____ An updated list of the employees/members who are authorized to administer controlled substances, including level of certification and expiration dates

_____ A copy of the expired or expiring BCS license

_____ Copies of the Controlled Substance Biannual Reports submitted for the duration of the previous license

_____ A check for \$100 for the controlled substance license, made payable to the NYS Department of Health **. **The check must be sent separately to the appropriate regional office, with a letter indicating agency name and agency code.**

**NOTE: Municipalities and Fire Department / Fire Districts Are Exempt from this fee.

EMAIL COMPLETED RENEWAL APPLICATION TO THE APPROPRIATE NYS DOH BUREAU OF EMS AND TRAUMA SYSTEMS REGIONAL OFFICE REPRESENTATIVE 30 DAYS PRIOR TO THE EXPIRATION.

Email Applications for Central New York Regional Office Staff to:
Maureen Guinta, Bureau of EMS: Maureen.Guinta@Health.ny.gov
Michael Bagozzi, Deputy Chief: Michael.Bagozzi@Health.ny.gov
Melissa Lockwood, District Chief: Melissa.Lockwood@Health.ny.gov

DO NOT EMAIL THE APPLICATION TO THE DOH EMS CENTRAL OFFICE