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## Instructions for Exceptions Request

**Mail:** Department of Health & Senior Services  
Section for Long-Term Care Regulation  
Attn: Regulation Unit  
P.O. Box 570  
Jefferson City, MO 65102

**Email:** [RegulationUnit@health.mo.gov](mailto:RegulationUnit@health.mo.gov) **Fax:** (573) 526-8797 (Attn: Regulation Unit)

**Phone:** (573) 526-8523 – Regulation Unit



*The Regulation Unit issues approval letters/certificates, reminder letters, and any other correspondence related to the exceptions and second businesses process via email to the facility Administrator/designee. Please provide a valid email address for the Administrator/designee in order to receive correspondence.*

The Exceptions and Second Business Chairperson will contact you if additional information is necessary.

The owner/operator or administrator of the facility must submit a signed written request and provide the following information:

1. Include the section number and text of the rule for the exception request. Please note if the request is being made as a result of a deficiency issued during an inspection.
2. Specific reasons why compliance with the rule would impose an undue hardship on the operator. A financial or structural hardship reason must include a cost estimate from architect, contractor, a professional estimator, or supplier (if appropriate).
3. Explanation of any extenuating factors that may be relevant to the exceptions request.
4. If applicable, provide a facility layout and/or pictures with a complete description of the individual characteristics of the area affected by the exception request.
5. Explanation of how you will safeguard the health, safety, and welfare of the residents if the exception were granted.

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(updated 03/20/17)