DATE:        April 14, 2017

TO:            State Survey Agency Directors

FROM:        Director
Survey and Certification Group

SUBJECT: Notice of Proposed Regulation Changes for Accrediting Organizations (AOs)
Transparency and Termination Notices

Memorandum Summary

- **Notice of Proposed Rule Making (NPRM):** The Centers for Medicare & Medicaid Services (CMS) published a proposed regulation Medicare Program; Hospital Inpatient Prospective Payment Systems (IPPS) for Acute Care Hospitals and the Long Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2018 Rates on April 14, 2017.

- **CMS Proposed Changes:** CMS proposed two changes within the NPRM open for public comment. These changes include a requirement for AOs with CMS-approved accreditation programs to post survey reports, as well as changes in termination notices for and Ambulatory Surgical Centers (ASCs), Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs) and Organ Procurement Organizations (OPOs), outlined below.

- **The Regulation is available for display on the Federal Register at**

Background

On April 14, 2017, the Hospital IPPS for Acute Care Hospitals and the Long Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2018 displayed on the Federal Register with the proposed rule scheduled for publication on April 28, 2017. For a fact sheet on the proposed rule, please visit:

CMS has proposed two changes within the regulation to include AO transparency in reporting and changes to newspaper notifications for ASCs, FQHCs, RHCs and OPOs. The public comment period is from April 28, 2017 to June 13, 2017.
AO Transparency

AOs currently do not make their survey reports and acceptable Plans of Corrections (PoCs) from their CMS-approved accreditation programs publicly available. This regulation proposes that these AOs be required to post all survey reports and acceptable PoCs from their CMS-approved accreditation programs on their websites. CMS continues to make the Regional Offices (RO) and State Agencies (SA) survey reports (2567’s) as well as their acceptable plans of correction (PoCs) publicly available through a variety of methods, in order to advance the Department’s and Agency’s commitment to transparency in terms of patient access to quality and safety information. Access to survey reports and PoCs will enable health care consumers, in addition to Medicare beneficiaries, to make a more informed decision regarding where to receive health care thus encouraging health care providers to improve the quality of care and services they provide.

Changes in Termination Notices

The existing regulations for the majority of providers and suppliers require CMS to notify the public of Medicare terminations. Currently, the public notice of termination for ASCs, FQHCs, RHCs and OPOs must be published in one or more local newspapers. Through this regulation, we propose to change the requirement for these providers/suppliers, in order to be consistent with other provider and suppliers’ public notification regulatory language by proposing to eliminate the posting of the termination notice in a local newspaper. Over time this method of posting has become outdated. We are proposing to allow more options for public notice that would reach the maximum number of people within a community.


Effective Date: Immediately. This policy should be communicated with all survey and certification staff, their managers and the State/Regional Office training coordinators within 30 days of this memorandum.

/s/
David R. Wright

cc: Survey and Certification Regional Office Management

The contents of this letter support actions to improve patient safety and increase quality and reliability of care and promote better outcomes.