



**Center for Clinical Standards and Quality/Survey & Certification Group**

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**Ref: S&C: 17-41-NH**

**DATE:** August 04, 2017

**TO:** State Survey Agency Directors

**FROM:** Director  
Survey and Certification Group

**SUBJECT:** Notification of Final Rule Published—Survey Team Composition and Investigation of Complaints

**Memorandum Summary**

- **Survey Team Composition and Investigation of Complaints:** On July 31, 2017, the Federal Register issued the final rule *Medicare Program: Prospective Payment - System and Consolidated Billing for Skilled Nursing Facilities (SNF) for FY 2018, SNF Value-Based Purchasing Program, SNF Quality Reporting Program, Survey Team Composition, and Correction of the Performance Period for the NHSN HCP Influenza Vaccination Immunization Reporting Measure in the ESRD QIP for PY 2020*. These regulations are effective on October 1, 2017.
- The Final Rule published on August 4, 2017 and can be found at <https://www.federalregister.gov/documents/2017/08/04/2017-16256/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities>.

**Background**

Within the *Prospective Payment - System and Consolidated Billing for Skilled Nursing Facilities (SNF) for FY 2018* Final Rule, the Centers of Medicare & Medicaid Services (CMS) has made four changes under sections 42 CFR 488.30, 488.301, 488.314, and 488.308. These changes were necessary to more clearly reflect the authorizing statutory requirements found in Sections 1819 and 1919 of the Social Security Act, to clarify the regulatory requirements for team composition for surveys conducted for investigating a complaint, and to better align regulatory provisions for investigation of complaints with the statutory requirements found in Sections 1819 and 1919 of the Act.

The regulatory changes clarify that only surveys conducted under sections 1819(g)(2) and 1919(g)(20) of the Act are subject to the requirement at section 488.314 that a survey team consist of an interdisciplinary team that must include a registered nurse. Also, complaint surveys and surveys related to on-site monitoring, including revisit surveys, are subject to the requirements of sections 1819(g)(4) and 1919(g)(4) of the Act and section 488.332, which allow the State Survey Agency or CMS to use a specialized investigative team that may include appropriate healthcare professionals as required to investigate the allegation or concern, but need

not include a registered nurse. This clarification is also reflected in revisions to the definition of complaint survey in section 488.30(a), the definition of abbreviated standard survey in section 488.301, and the requirements for the investigation of complaints in section 488.308. The final rule displayed on July 31, 2017, and published on August 4, 2017 through the Federal Register and is available at <https://www.federalregister.gov/documents/2017/08/04/2017-16256/medicare-program-prospective-payment-system-and-consolidated-billing-for-skilled-nursing-facilities>.

**Contact:** For questions regarding survey team composition and the investigation of complaints, please contact [DNH\\_TriageTeam@cms.hhs.gov](mailto:DNH_TriageTeam@cms.hhs.gov).

**Effective Date:** Immediately. The information provided in this memorandum 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