MEMORANDUM
Texas Department of Aging & Disability Services

TO: Regulatory Services Division
Regional Directors and State Office Managers

FROM: Todd Boerger, Unit Manager
Policy, Rules and Curriculum Development Unit
State Office MC E-370

SUBJECT: Centers for Medicare and Medicaid Services Region VI Regional Survey and Certification Letter No. 10-02

DATE: July 2, 2010

The referenced Region VI Centers for Medicare and Medicaid Services (CMS) Regional Survey and Certification (RS&C) Letter was issued on May 27, 2010. This letter, which was distributed by e-mail on June 29, 2010, is being provided to you for information purposes and should be shared with all professional staff.

- RS&C Letter No. 10-02 – Documents for Processing Certification Actions for All Non-Long Term Care Providers/Suppliers (except ICFs/MR and Clinical Laboratories)

If you have any questions about this memo, please contact a home health/hospice policy program specialist in the Policy, Rules and Curriculum Development unit at 512-438-3161.

Attachment
May 27, 2010

Regional Survey and Certification Letter No. 10-02

To: All State Survey Agencies (Action)
    All Title XIX Single State Agencies (Information)

Subject: Documents for Processing Certification Actions for All Non-Long Term Care Provider/Suppliers (except ICFs/MR and clinical laboratories)

This Regional Survey and Certification (RS&C) letter supersedes RS&C letters 03-05 and 02-05.

The purpose of this letter is to clarify the documents our State survey agencies are to include in provider/supplier certification packets that are submitted to the regional office (RO) for approval or denial of actions. In addition, this letter will provide clarification regarding which documents may be submitted via electronic means, including use of scanned copies or attachments in the ASPEN system.

Each action should be submitted with a completed Medicare/Medicaid Certification and Transmittal (C&T), which serves as a cover sheet for the documents that must be mailed. The State agency (SA) should ensure that the following items on the C&T are complete for the providers listed above:

- 16. State Survey Remarks – In this section, annotate appropriate detailed information to provide clarification regarding the recommended action. List the approved services, SA recommendation for approval or denial of certification and the recommended effective date.
- 20. State Survey Agency Approval – The authorized SA representative’s signature constitutes verification that the submitted information is correct. (See State Operations Manual §2764.)
- 22. Original Date of Participation (L24) – Required for changes of ownership and relocations.
- 29. Intermediary/Carrier No. (L31) – Enter the Medicare Administrative Contractor (MAC) identification number.

When the certification action is finalized by the RO, the MAC will be notified via tie-in or tie-out notice by the RO. The SA will be able to retrieve certification information from the ASPEN system.

Attached is a listing of forms and documents that must be forwarded to the RO for various certification actions, by provider/supplier type. Some documents are marked with an asterisk,
indicating the document should be attached to ASPEN, via data entry or scanned, and a hard copy should not be sent to the RO.

If you have any questions, please refer to our current divisional contact list for the assigned staff member’s name and phone number, or contact our office at 214.767.6301.

Sincerely,

David Wright
Associate Regional Administrator
Dallas Division of Survey and Certification

Attachments:
  Ambulatory Surgical Center
  Community Mental Health Center
  Comprehensive Outpatient Rehabilitation Facility
  Critical Access Hospital
  End Stage Renal Disease
  Home Health Agency
  Hospice
  Hospital
  Outpatient Physical Therapy
  Portable X-Ray
  Rural Health Clinic
  Transplant
# Ambulatory Surgical Center (ASC)

## Initial Certification (Deemed)
- Medicare/Medicaid Certification and Transmittal (C&T)  
  - CMS-1539
- Medicare General Enrollment  
  - CMS-855B
- MAC Approval Letter  
- Accrediting Organization (AO) Approval Letter – Deemed Status  
- *ASC Request for Certification in the Medicare Program  
  - CMS-377
- Original Health Insurance Benefit Agreement  
  - CMS-370

## Initial Certification (Not Deemed)
- Medicare/Medicaid Certification and Transmittal (C&T)  
  - CMS-1539
- Medicare General Enrollment  
  - CMS-855B
- MAC Approval Letter  
- *Statement of Deficiencies (Health & LSC)  
  - CMS-2567
- *Plan of Correction, if applicable, with signed first page  
  - CMS-2567
- *Survey Team Composition and Workload Report  
  - CMS-670
- *Crucial Data Extract – ASC  
  - CMS-378E
- *Fire Safety Survey Report  
  - CMS-2786U
- *ASC Request for Certification in the Medicare Program  
  - CMS-377
- Original Health Insurance Benefit Agreement  
  - CMS-370

## Initial Denial
- Medicare/Medicaid Certification and Transmittal (C&T)  
  - CMS-1539
- Medicare General Enrollment  
  - CMS-855B
- MAC Approval Letter  
- *Statement of Deficiencies (Health & LSC)  
  - CMS-2567
- *Survey Team Composition and Workload Report  
  - CMS-670

## Change of Ownership (CHOW)
- Medicare/Medicaid Certification and Transmittal (C&T)  
  - CMS-1539
- Medicare General Enrollment  
  - CMS-855B
- MAC Approval Letter  
- Legal Documentation of Sale  
- Original Health Insurance Benefit Agreement  
  - CMS-370

## Voluntary Termination/Cessation of Business
- Medicare/Medicaid Certification and Transmittal (C&T)  
  - CMS-1539
- Medicare General Enrollment, if available  
  - CMS-855B
- MAC Approval Letter, if available  
- Evidence of voluntary termination or withdrawal, including effective date

*Denotes documents to be entered in ASPEN only.  
RS & C Letter 10-02
Community Mental Health Center (CMHC)

**Initial Certification**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Approval Letter
- Attestation Statements  Exh-275
- Crucial Data Extract  Exh-131
- Original Health Insurance Benefit Agreement  CMS-1561
- Office of Civil Rights (OCR) Packet

**Change of Ownership (CHOW)**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Approval Letter
- Legal Documentation of Sale
- Original Health Insurance Benefit Agreement  CMS-1561
- Office of Civil Rights (OCR) Packet

**Voluntary Termination/Cessation of Business**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment, if available  CMS-855A
- MAC Approval Letter, if available
- Evidence of voluntary termination or withdrawal, including effective date

**Name Change/Address Change**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Recommendation Letter
- RO pre-approval letter (address changes only)

**Alternative Location**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Recommendation Letter

*Denotes documents to be entered in ASPEN only.*
### Comprehensive Outpatient Rehabilitation Facility (CORF)

#### Initial Certification
- Medicare/Medicaid Certification and Transmittal (C&T)
- Medicare General Enrollment
- MAC Approval Letter
- *Statement of Deficiencies* (CMS-2567)
- *Plan of Correction, if applicable, with signed first page* (CMS-2567)
- *Survey Team Composition and Workload Report* (CMS-670)
- *Request to Establish Eligibility* (CMS-359)
- Original Health Insurance Benefit Agreement (CMS-1561)
- Office of Civil Rights (OCR) Packet

#### Initial Denial
- Medicare/Medicaid Certification and Transmittal (C&T)
- Medicare General Enrollment
- MAC Approval Letter
- *Statement of Deficiencies* (CMS-2567)
- *Request to Establish Eligibility* (CMS-359)
- *Survey Team Composition and Workload Report* (CMS-670)

#### Change of Ownership (CHOW)
- Medicare/Medicaid Certification and Transmittal (C&T)
- Medicare General Enrollment
- MAC Approval Letter
- Legal Documentation of Sale
- Health Insurance Benefit Agreement
- Office of Civil Rights (OCR) Packet

#### Voluntary Termination/Cessation of Business
- Medicare/Medicaid Certification and Transmittal (C&T)
- Medicare General Enrollment, if available
- MAC Approval Letter, if available
- Evidence of voluntary termination or withdrawal, including effective date

#### Address Change that Requires a Survey of the New Site
- Medicare/Medicaid Certification and Transmittal (C&T)
- Medicare General Enrollment
- MAC Approval Letter
- *Statement of Deficiencies* (CMS-2567)
- *Plan of Correction, if applicable, with signed first page* (CMS-2567)

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## Critical Access Hospital (CAH)

### Conversion from Certified Acute Care Hospital (Deemed)
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Accrediting Organizations (AO) Approval Letter – Deemed Status
- *Hospital/CAH Medicare Database Worksheet
- A document with the hospital’s fiscal year ending date
- Evidence of compliance with distance requirements, 42 CFR 485.610

### Conversion from Certified Acute Care Hospital (Non-Deemed)
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies (Health & LSC) CMS-2567
- * Plan of Correction-, if applicable, with signed first page CMS-2567
- *Survey Team Composition and Worksheet Report CMS-670
- *Hospital/CAH Medicare Database Worksheet
- A document with the hospital’s fiscal year ending date
- Evidence of compliance with distance requirements, 42 CFR 485.610

### Initial Denial
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies CMS-2567
- *Survey Team Composition and Workload Report CMS-670

### Change of Ownership (CHOW)
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Health Insurance Benefit Agreement CMS-1561
- Legal Documentation of Sale

### Voluntary Termination/Cessation of Business
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment, if available CMS-855A
- MAC Approval Letter, if available
- Evidence of voluntary termination or withdrawal, including effective date

### Swing Beds (Deemed)
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Accrediting Organizations (AO) Approval Letter – Deemed Status
- *Request for Approval as a Hospital Provider of Extended Care Services CMS-605
- *Hospital Survey Report Crucial Data Extract CMS-1537E
- *Medicare/Medicaid Hospital Swing-Bed Survey Report CMS-1537C

*Denotes documents to be entered in ASPEN only.*
**Swing-Beds (Non-deemed)**

<table>
<thead>
<tr>
<th>Document Description</th>
<th>CMS Number</th>
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<tbody>
<tr>
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</tr>
<tr>
<td>Medicare General Enrollment</td>
<td>CMS-855A</td>
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<tr>
<td>MAC Approval Letter</td>
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<tr>
<td>*Statement of Deficiencies</td>
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</tr>
<tr>
<td>*Medicare/Medicaid Hospital Swing-Bed Survey Report</td>
<td>CMS-1537C</td>
</tr>
</tbody>
</table>

**Initial Certification (Attestation) for Rehabilitation or Psychiatric Units** – See “Hospital” section

*Denotes documents to be entered in ASPEN only.*
End Stage Renal Disease (ESRD)

**Initial Certification**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies (Health & LSC) CMS-2567
- *Plan of Correction, if applicable, with signed first page CMS-2567
- *Survey Team Composition and Workload Report CMS-670
- *ESRD Application/Notification and Survey and Certification Report CMS-3427

**Initial Denial**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies (Health & LSC) CMS-2567
- *Survey Team Composition and Workload Report CMS-670

**Change of Ownership (CHOW)**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *ESRD Application/Notification and Survey and Certification Report CMS-3427
- Legal Documentation of Sale

**Voluntary Termination/Cessation of Business**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment, if available CMS-855A
- MAC Approval Letter, if available
- Evidence of voluntary termination or withdrawal, including effective date

**Address Change that Requires a Survey of the New Site**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies (Health & LSC) CMS-2567
- *Plan of Correction, if applicable, with signed first page CMS-2567
- *Survey Team Composition and Workload Report CMS-670
- *ESRD Application/Notification and Survey and Certification Report CMS-3427

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# Home Health Agency (HHA)

## Initial Certification (Deemed)
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Accrediting Organization (AO) Approval Letter – Deemed Status
- *Home Health Agency Survey and Deficiencies Report CMS-1572a,b
- Original Health Insurance Benefit Agreement CMS-1561
- Office of Civil Rights (OCR) Packet

## Initial Certification (Non-Deemed)
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies CMS-2567
- *Plan of Correction, if applicable, with signed first page CMS-2567
- *Survey Team Composition and Workload Report CMS-670
- *Home Health Agency Survey and Deficiencies Report CMS-1572a,b
- Original Health Insurance Benefit Agreement CMS-1561
- Office of Civil Rights (OCR) Packet

## HHA Branches
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- HHA Branch Questionnaire

## Change of Ownership (CHOW)
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Legal Documentation of Sale
- Health Insurance Benefit Agreement CMS-1561
- Office of Civil Rights (OCR) Packet

## Initial Denial
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies CMS-2567
- *Survey Team Composition and Workload Report CMS-670

## Voluntary Termination/Cessation of Business
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment, if available CMS-855A
- MAC Approval Letter, if available
- Evidence of voluntary termination or withdrawal, including effective date

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RS & C Letter 10-02
Hospice

**Initial Certification (Deemed)**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Approval Letter
- Accrediting Organization (AO) Approval Letter – Deemed Status
- *Hospice Request for Certification in the Medicare Program  CMS-417
- *Hospice Survey and Deficiencies Report  CMS-643
- Original Health Insurance Benefit Agreement  CMS-1561
- Office of Civil Rights (OCR) Packet

**Initial Certification (Non-Deemed)**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies (Health & LSC-inpatient only)  CMS-2567
- *Plan of Correction, if applicable, with signed first page  CMS-2567
- *Survey Team Composition and Workload Report  CMS-670
- *Hospice Request for Certification in the Medicare Program  CMS-417
- *Hospice Survey and Deficiencies Report  CMS-643
- *Fire Safety Survey Report (See 42 CFR 418.110)  CMS-2786R
- Original Health Insurance Benefit Agreement  CMS-1561
- Office of Civil Rights (OCR) Packet

**Initial Denial**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies  CMS-2567
- *Survey Team Composition and Workload Report  CMS-670
- *Hospice Request for Certification in the Medicare Program  CMS-417

**Change of Ownership (CHOW)**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Approval Letter
- Legal Documentation of Sale
- Health Insurance Benefit Agreement  CMS-1561
- Office of Civil Rights (OCR) Packet

**Multiple Locations**
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855A
- MAC Approval Letter
- Documentation listed at State Operations Manual §2088

*Denotes documents to be entered in ASPEN only.*
Voluntary Termination/Cessation of Business
Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
Medicare General Enrollment, if available  CMS-855A
MAC Approval Letter, if available
Evidence of voluntary termination or withdrawal, including effective date

Address Change that Requires a Survey of the New Site
Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
Medicare General Enrollment  CMS-855A
MAC Approval Letter
*Statement of Deficiencies (Health & LSC-inpatient unit only)  CMS-2567
*Plan of Correction, if applicable, with signed first page  CMS-2567
*Survey Team Composition and Workload Report  CMS-670

Inpatient Unit (Deemed)
Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
Medicare General Enrollment  CMS-855A
MAC Approval Letter
Accrediting Organization (AO) Approval Letter

Inpatient Unit (Non-deemed)
Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
Medicare General Enrollment  CMS-855A
MAC Approval Letter
*Statement of Deficiencies (Health & LSC)  CMS-2567
*Plan of Correction, if applicable, with signed first page  CMS-2567
*Survey Team Composition and Workload Report  CMS-670
**Hospitals**

**IPPS Hospitals:**

**Initial Certification for Acute Deemed Hospital**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Accrediting Organization (AO) Approval Letter – Deemed Status
- *Hospital/CAH Medicare Database Worksheet
- A document with the hospital’s fiscal year ending date
- Original Health Insurance Benefit Agreement CMS-1561
- Office of Civil Rights (OCR) Packet

**Initial Certification for Acute Non-Deemed Hospital**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Hospital/CAH Medicare Database Worksheet
- A document with the hospital’s fiscal year ending date
- *Statement of Deficiencies (Health & LSC) CMS-2567
- *Plan of Correction, if applicable, with signed first page CMS-2567
- *Survey Team Composition and Workload Report CMS-670
- *Crucial Data Extract – Health CMS-1537A
- *LSC Crucial Data Extracts CMS-2786E & R
- Original Health Insurance Benefit Agreement CMS-1561
- Office of Civil Rights (OCR) Packet

**Initial Denial**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- *Statement of Deficiencies (Health & LSC) CMS-2567
- *Survey Team Composition and Worksheet Report CMS-670

**IPPS-Exempt Hospitals and Units:**

**Initial Certification for Psychiatric Hospital (Deemed)**
- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Accrediting Organization (AO) Approval Letter – Deemed Status
- *Statement of Deficiencies and Plan of Correction (B tags) CMS-2567
- *Survey Team Composition and Workload Report (B tags) CMS-670
- A document with the hospital’s fiscal year ending date
- *Hospital/CAH Medicare Database Worksheet
- Original Health Insurance Benefit Agreement CMS-156
- Office of Civil Rights (OCR) Packet

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RS & C Letter 10-02
**Initial Certification for Psychiatric Hospital (Non-deemed)**

Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Statement of Deficiencies (Health, A-tags, & LSC) CMS-2567
*Plan of Correction, if applicable, with signed first page CMS-2567
*Statement of Deficiencies and Plan of Correction (B tags) CMS-2567
*Survey Team Composition and Workload Report CMS-670
A document with the hospital’s fiscal year ending date
*Hospital/CAH Medicare Database Worksheet
Original Health Insurance Benefit Agreement CMS-1561
Office of Civil Rights (OCR) Packet

**Initial Certification (Attestation) for Psychiatric Unit**

Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Psychiatric Unit Criteria Work Sheet CMS-437
Medical records protocols & Staff Requirements (See 42 CFR 412.27)

**Initial Certification for Rehabilitation Hospital (Deemed).**

Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
Accrediting Organization (AO) Approval Letter – Deemed Status CMS-437B
Rehabilitation Hospital Criteria Work Sheet
A document with the hospital’s fiscal year ending date
*Hospital/CAH Medicare Database Worksheet
Health Insurance Benefit Agreement CMS-1561
Office of Civil Rights (OCR) Packet
Facility Attestation of Compliance with Rehabilitation Requirements in 412.23(b)(2)
Certification that inpatient population the hospital intends to serve meets the requirements of 412.23(b)(2).
Documentation of compliance with the Medical Director requirements 412.23(b)(5).

**Initial Certification for Rehabilitation Hospital (Non-deemed)**

Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Statement of Deficiencies (Health & LSC) CMS-2567
*Plan of Correction, if applicable, with signed first page CMS-2567
*Survey Team Composition and Workload Report CMS-670
Rehabilitation Hospital Criteria Work Sheet CMS-437B
A document with the hospital’s fiscal year ending date
*Hospital/CAH Medicare Database Worksheet
Health Insurance Benefit Agreement CMS-1561
Office of Civil Rights (OCR) Packet
Facility Attestation of Compliance with Rehabilitation Requirements in 412.23(b)(2)
Certification that the inpatient population the hospital intends to serve meets the requirements of 412.23(b)(5).

**Initial Certification (Attestation) for Rehabilitation Unit**

*Denotes documents to be entered in ASPEN only. RS & C Letter 10-02
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Rehabilitation Unit Criteria Work Sheet CMS-437A
Documentation that the unit meets the Medical Director requirements (See 42 CFR 412.29)

Conversion to Long Term Care Hospital
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC letter verifying the hospital meets the length of stay requirements and the moratorium.
Documentation regarding Hospital within Hospital requirements, if applicable. (See 42 CFR 412.22(e))

Initial Certification for Children’s Hospitals (Deemed and Non-deemed)
Submit the same documents required for an acute deemed or non-deemed hospital.
Letter from the MAC verifying the age criterion data for the hospital.

Other Actions:

Swing-Beds for an Acute (Deemed or Non-deemed) Hospital
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Statement of Deficiencies CMS-2567
*Survey Team Composition and Worksheet Report CMS–670
*Request for Approval as a Hospital Provider of Extended Care Service CMS-605
*Hospital Survey Report Crucial Data Extract CMS-1537E
*Medicare/Medicaid Hospital Swing-Bed Survey Report CMS-1537C
An Accreditation Organization cannot deem the swing-bed requirements for acute hospitals.

Voluntary Termination/Cessation of Business
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment, if available CMS-855A
MAC Approval Letter, if available
Evidence of voluntary termination or withdrawal, including effective date

Emergency Services for non-participating hospitals
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Any supporting documentation of service

Ownership Changes and Related Actions:

Change of Ownership (CHOW)
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
A document with the hospital’s fiscal year ending date
Legal Documentation of Sale
Health Insurance Benefit Agreement CMS-1561

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Office of Civil Rights (OCR) Packet

**CHOW with change to practice location**

A hospital can purchase another hospital with the intent to make the purchased hospital a practice location of the surviving hospital. Submit a CHOW packet including the CMS-855 which should indicate that the purchased location is to become a practice location to the surviving CCN number. Also, submit a packet to retire the purchased CCN number.

**Merger**

There are different types of mergers:

- If two hospitals are owned by two different entities, a CHOW must occur first because there must be common ownership before a merger can occur.
- If two hospitals are owned by the same owner, a merger can occur because there is already common ownership.

Mergers always involve two hospitals. As a result of the merger one CCN will retire and that location will usually become a practice location for the surviving CCN.

**Surviving Provider**

- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Legal Documentation concerning the Merger
  - A document with the hospital’s fiscal year ending date
  - In the remarks section, indicate when the merger occurred and what will happen with the retired provider.
  - The summary page should state if the retired provider will become a practice location of the surviving provider.

**Retired Provider**

- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter

**Stock/Management Transfer**

- Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
- Medicare General Enrollment CMS-855A
- MAC Approval Letter
- Legal Documentation of Sales/Purchase/Lease

*Denotes documents to be entered in ASPEN only.*
Out Patient Physical Therapy (OPT)

Initial Certification
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Statement of Deficiencies (Health & LSC) CMS-2567
*Plan of Correction, if applicable, with signed first page CMS-2567
*Survey Team Composition and Workload Report CMS-670
*Request to Establish Eligibility CMS-1856
Original Health Insurance Benefit Agreement CMS-1561
Office of Civil Rights (OCR) Packet

Initial Denial
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Statement of Deficiencies CMS-2567
*Survey Team Composition and Workload Report CMS-670
*Request to Establish Eligibility CMS-1856

Change of Ownership (CHOW)
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
Legal Documentation of Sale
Health Insurance Benefit Agreement CMS-1561
Office of Civil Rights (OCR) Packet

Addition or Deletion of Extension Unit or Services
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment CMS-855A
MAC Approval Letter
*Statement of Deficiencies (Health & LSC) CMS-2567
*Plan of Correction, if applicable, with signed first page CMS-2567
*Survey Team Composition and Workload Report CMS-670

Voluntary Termination/Cessation of Business
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment, if available CMS-855A
MAC Approval Letter, if available
Evidence of voluntary termination or withdrawal, including effective date

*Denotes documents to be entered in ASPEN only. RS & C Letter 10-02
## Portable X-Ray (PXR)

### Initial Certification
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855B
- MAC Approval Letter
- *Statement of Deficiencies  CMS-2567
- *Plan of Correction, if applicable, with signed first page  CMS-2567
- *Survey Team Composition and Workload Report  CMS-670
- *Request for Certification as Supplier of Portable X-Ray Services  CMS-1880

### Initial Denial
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855B
- MAC Approval Letter
- *Statement of Deficiencies  CMS-2567
- *Survey Team Composition and Workload Report  CMS-670
- *Request for Certification as Supplier of Portable X-Ray Services  CMS-1880

### Change of Ownership (CHOW)
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment  CMS-855B
- MAC Approval Letter
- Legal Documentation of Sale

### Voluntary Termination/Cessation of Business
- Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
- Medicare General Enrollment, if available  CMS-855B
- MAC Approval Letter, if available
- Evidence of voluntary termination or withdrawal, including effective date
Rural Health Clinic (RHC)

Initial Certification
Medicare/Medicaid Certification and Transmittal CMS-1539
Medicare General Enrollment Application CMS-855A
MAC Recommendation Letter
*Request to Establish Eligibility CMS-29
*Statement of Deficiencies (Health & LSC) CMS-2567
*Plan of Correction, if applicable, with signed first page CMS-2567
*Survey Team Composition and Workload Report CMS-670
*Rural Health Clinic Survey Report CMS-30E
Original Health Insurance Benefit Agreement CMS-1561A
Office of Civil Rights (OCR) Packet (Provider-based only)

Initial Denial
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment Application CMS-855A
MAC Recommendation Letter
*Statement of Deficiencies CMS-2567
*Survey Team Composition and Workload Report CMS-670

Change of Ownership (CHOW)
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment Application CMS-855A
MAC Recommendation Letter
*Request to Establish Eligibility CMS-29
Health Insurance Benefit Agreement CMS-1561A
Office of Civil Rights (OCR) Packet (Provider-based only)
Legal Documentation of Sale

Voluntary Termination/Cessation of Business
Medicare/Medicaid Certification and Transmittal (C&T) CMS-1539
Medicare General Enrollment Application CMS-855A
MAC Recommendation Letter
Evidence of voluntary termination or withdrawal, including effective date

*Denotes documents to be entered in ASPEN only. RS & C Letter 10-02
Transplant

Initial Certification
Medicare/Medicaid Certification and Transmittal (C&T)  CMS-1539
*Statement of Deficiencies (Health & LSC)  CMS-2567
*Plan of Correction, if applicable, with signed first page  CMS-2567
*Survey Team Composition and Worksheet Report  CMS-670
Patient ID List (Under Cert Kit Attachments)
TPQR (Under Cert Kit Attachments)

*Denotes documents to be entered in ASPEN only.