

Center for Medicaid and State Operations/Survey & Certification Group

Admin Info: 10-12-ALL

DATE: February 19, 2010
TO: State Survey Agency Directors
FROM: Director
Survey and Certification Group
SUBJECT: 2010 Leadership Summit – Required Attendance

Memorandum Summary

- **2010 Leadership Summit Dates:** April 26-28, 2010 (Monday to Wednesday)
- **Location:** Baltimore, MD
- **Attendance Required:** Attendance is mandatory for the State Survey Agency (SA) Director and one other manager. All Centers for Medicare & Medicaid Services (CMS) regional office managers should also attend. Travel expenses for the two designated State staff are 100% federally-funded.

The 2010 Leadership Summit will take place April 26-28, 2010 at the Hyatt Regency Inner Harbor hotel in Baltimore, MD. Please save these dates on your calendars and plan to arrive on Sunday April 25th.

While we appreciate the funding constraints affecting many States, the annual CMS Survey & Certification Leadership Summit training is required for the State Survey Agency director and one other top SA management official designated by the SA director. Travel expenses for these two individuals from each State is fully federally funded. We strongly urge that you bring as many of your other management staff as you can. All CMS regional office managers should also attend.

Conference registration is currently underway through the CMS SumTotal Learning Management System (LMS). For registration questions, please contact the CMS central office training coordinators, Lisa Byrd at Lisa.byrd@cms.hhs.gov or Patricia Payne at patricia.payne@cms.hhs.gov.

/s/

Thomas E. Hamilton

cc: Survey and Certification Regional Office Management

Center for Medicaid and State Operations/Survey and Certification Group

Admin Info: 10-13-ALL

DATE: February 26, 2010

TO: State Survey Agency Directors

FROM: Director
Survey and Certification Group

SUBJECT: Request for Materials for the Improving Nursing Home Compare Project

Memorandum Summary

- **Standardized Complaint Form** – We are planning to create a voluntary, standardized complaint form. We seek input and assistance from all State Survey Agencies (SAs). The effort requires gathering data on current forms, instructions, and State laws and regulations pertaining to complaint forms.
- **Quality Assurance/Performance Improvement and Compliance and Ethics Programs** – Developing criteria to assess: (1) the extent to which a provider has implemented quality assurance/performance improvement and compliance and ethics programs; and (2) that programs are functioning effectively, requires gathering information on all State laws, regulations, conditions of participation, etc.

Background

The Centers for Medicare & Medicaid Services (CMS) is working with the Colorado Foundation for Medical Care (CFMC) and Abt Associates to collect information for the Improving Nursing Home Compare project. CFMC is working on two subtasks of the project that require the collection of data from SAs pertaining to complaint forms and Quality Assurance - Performance Improvement and/or Compliance and Ethics programs.

The first subtask will result in the creation of a standardized complaint form for use by a Long-Term Care resident or a person acting on the resident's behalf in filing a complaint with a SA. It is anticipated that the standardized form will be used by all SAs. The ultimate objective of the task is to develop a complaint form and process that is concise, user-friendly, intuitive, easy to read, comprehensive, and meets the needs of all stakeholders. Use of the complaint form would be voluntary on the part of the complainant, and would not limit the ability of complainants to lodge a complaint by any other methods.

CFMC will work with SAs, CMS Regional Offices, Ombudsman Offices, providers, and Medicare beneficiaries in the development of the form.

The task requires the collection of the following pieces of data from SAs:

- All complaint forms currently in use
- All instructions for completion of the complaint forms
- All processes related to the use, tracking, and resolution of the complaint form
- All state laws and regulations pertaining to complaint forms
- Any input for recommended revisions or concerns from the SAs

The second subtask will be evaluating criteria for both Quality Assurance-Performance Improvement and Compliance and Ethics programs. Items related to this task that are most pertinent include:

- All State laws, regulations, conditions of participation, etc. pertaining to Quality Assurance-Performance Improvement and/or Compliance and Ethics programs
- Any input for recommended revisions or concerns from the SAs

It would be preferable if all materials could be sent to Ann Romaglia electronically or by note of Web addresses/links no later than March 12, 2010.

CMS and CFMC greatly appreciate the assistance from States in this matter. Ann Romaglia is available to discuss the project or respond to any questions from SA staff via the contact information listed below.

Email: aromaglia@cfmc.org
Telephone: 303-669-2689
Fax: 303-695-3350
Mailing Address: Colorado Foundation for Medical Care
23 Inverness Way East, Suite 100
Englewood, Colorado 80112-5708

For additional information, contact Leslie Boyd via email Leslie.boyd@cms.hhs.gov or by telephone: 410-786-2890.

Effective Date: Please remit the requested materials to Ann Romaglia by March 12, 2010.

Training: This policy should be shared with all survey and certification staff and their managers.

/s/
Thomas E. Hamilton

cc: Survey and Certification Regional Office Management



Center for Medicaid and State Operations/Survey & Certification Group

Admin Info: 10-14-ALL

DATE: February 26, 2010

TO: State Survey Agency Directors

FROM: Director
Survey and Certification Group

SUBJECT: FY 2010 State Medicare Allocations for Survey & Certification (S&C)

Memorandum Summary

- **National Budget:** On December 16, 2009, the President signed the Consolidated Appropriations Act of 2010, P.L. 111-117. Congress approved the full President's Medicare S&C budget request for 2010. FY 2010 funding represents an average 11.6% increase to the States in the S&C Medicare baseline budget over the FY 2009 appropriated level, plus additional funds for State travel-training.
- **State Budgets:** Attachment 1 contains FY 2010 Medicare allocation figures for each State. The total base allocation increases range from 6.08% to 17.37%, depending on the State's survey workload as measured by the Budget Allocation Tool (BAT).
- **Non-Delivery Deductions:** The few States that did not conduct the full number of statutorily-required surveys in 2009 (nursing home or home health surveys) will not see the full extent of the increase otherwise available. A few additional States that did not complete the full Tier II targeted surveys for End Stage Renal Disease (ESRD) facilities (10%) or Ambulatory Surgical Centers (ASCs) (10%), or hospitals (5%) will similarly not receive the full increase.

1. Overview - Medicare Survey & Certification (S&C) Budgets

On December 16, 2009, the President signed the Consolidated Appropriations Act of 2010, P.L. 111-117. Congress approved the President's Medicare S&C budget request for 2010 in full. This memo updates and supplements the information provided to you in the Mission and Priority Document (MPD) previously issued (Admin Info Memo 09-39, dated September 4, 2009).

2. Baseline Increases of 6.08%-17.37% (Columns D+E) for FY 2010 – See Attachment 1

Column B of Attachment 1 reflects FY 2009 final allocations, less the validation and special project supplements that vary year by year based on State-specific initiatives and workload factors. We also added back any non-delivery deductions previously made, so the FY 2009

starting point in Column B treats States as if all statutorily-required surveys were done in 2008. Each State's percentage increase (column D) is affected by its workload, as measured by the Budget Allocation Tool (BAT). Column E in Attachment 1 contains the FY 2010 allocation baseline increase. Column F provides the State's baseline budget. Column G contains the special travel-training funds dedicated to each State. We will consider the amounts in column G to be a continuing addition to the State's baseline amounts, with similar travel amounts added to the State's baseline budget for 2011 unless the State is not using the funds. Column H amounts will be added on a flow basis as one-time awards are made, and a separate memorandum is being issued with regard to the availability of one-time funds. Column I amounts (validation supplements) are also added on a flow basis as assignments are made and validation surveys are completed. Column L provides the final State budget to which any one-time funds or validation supplements will be added as they occur.

3. State Training Travel (Column G)

Unless otherwise requested by a State, we will consider the special travel-training funds (separately identified in Appendix 1) to be the first dollars spent for surveyors attending in-person CMS training courses published in the CMS training schedule. Examples can be located in both the FY 2010 MPD (Admin Info memo 09-39) and Training MPD (Admin Info memo 09-40).

4. One-Time Adjustments (Column H)

These funds are comprised of (a) redistributions of funds that remained after non-delivery deductions were made, (b) proceeds from temporary reductions in CMS contracts made in order to support State initiatives and productivity investments, and any additional funds available. A separate memorandum is being issued to provide States with one-time funds for FY 2010.

5. Non-Delivery Deductions – Statutory Mandates (Column J)

Updated and cleaned 2009 data indicate that a few States failed to survey nursing homes and home health agencies within the time intervals required by the Social Security Act. We made non-delivery deductions in each case (column I), and will allocate the funds as appropriate (i.e. one-time funds). Note that a complete survey is comprised of both the health and life-safety code components. If one of the two components has not been completed by the 15-month statutory deadline, the survey is recorded as not completed.

6. Non-Delivery Deductions – Tier II Targeted Surveys (Column K)

As indicated in the 2009 MPD, we have calculated non-delivery deductions for ASC and ESRD Tier II targeted surveys that were not completed (all States completed the hospital Tier II surveys). For most States this is a very small number of surveys. A plan of correction approved by CMS may enable a State to have these funds restored for FY 2010, so long as the non-deliveries in FY 2009 were not in the same provider category as FY 2008 non-deliveries.

7. Next Steps (All States): Please submit into the S&C online budget system, the FY 2010 budget forms by March 26, 2010, including the following:

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1. CMS-435 budget approval form. *Note: This form should capture all projected FY 2010 expenditures (including MDS, OASIS, and the NHOIP) spread across the appropriate lines of the CMS-435.*
2. 2 mini CMS-435s for MDS and OASIS with projected expenditures spread across the appropriate line items;
3. CMS-434 Planned Workload Report;
4. CMS-1465A Budget List of Positions; and
5. CMS-1466 Schedule for Equipment

/s/

Thomas E. Hamilton

cc: Survey and Certification Regional Office Management
Attachments

Attachment 1 - FY2010 State S&C Budget Allocations

A	B	C	D	E	F	G	H	I	J	K	L
State	FY 09 State Budget Adjusted	Quintile	Baseline increase %	Baseline increase \$	FY 10 State Budget Baseline	State Training Travel	One-Time Adjustments	Valid. Suppl.	Tier 1 Non-Del Deduction	Tier 2 Non-Del Deduction	FY 10 Final State Budget
CT	\$5,127,668	2	13.39%	\$686,595	\$5,814,263	\$20,800		*	\$0	\$0	\$5,835,063
ME	\$2,195,738	4	8.80%	\$193,170	\$2,388,908	\$15,600		*	\$0	\$0	\$2,404,508
MA	\$7,557,269	5	10.55%	\$797,197	\$8,354,466	\$14,300		*	\$0	\$0	\$8,368,766
NH	\$1,010,601	3	10.55%	\$106,606	\$1,117,207	\$5,200		*	\$0	\$0	\$1,122,407
RI	\$1,723,731	3	10.77%	\$185,581	\$1,909,312	\$3,900		*	\$0	(\$17,400)	\$1,895,812
VT	\$743,066	2	13.00%	\$96,599	\$839,665	\$7,800		*	\$0	\$0	\$847,465
NJ	\$6,611,726	3	10.98%	\$726,215	\$7,337,941	\$53,300		*	\$0	\$0	\$7,391,241
NY	\$11,945,244	1	14.95%	\$1,785,695	\$13,730,939	\$126,100	\$61,074	*	\$0	\$0	\$13,918,113
PR	\$517,643	5	6.35%	\$32,844	\$550,487	\$2,600		*	\$0	(\$26,100)	\$526,987
DE	\$820,164	3	11.42%	\$93,652	\$913,816	\$6,500		*	\$0	\$0	\$920,316
DC	\$810,435	5	6.08%	\$49,234	\$859,669	\$20,800		*	\$0	(\$17,400)	\$863,069
MD	\$3,317,433	2	12.87%	\$426,954	\$3,744,387	\$22,100		*	(\$9,600)	\$0	\$3,756,887
PA	\$9,751,843	3	10.77%	\$1,049,908	\$10,801,751	\$68,900		*	\$0	(\$3,900)	\$10,866,751
VA	\$3,653,357	4	7.91%	\$288,798	\$3,942,155	\$22,100		*	\$0	(\$21,300)	\$3,942,955
WV	\$2,002,518	3	10.55%	\$211,241	\$2,213,759	\$22,100		*	\$0	\$0	\$2,235,859
AL	\$4,349,919	4	8.67%	\$377,138	\$4,727,057	\$13,000		*	\$0	\$0	\$4,740,057
FL	\$9,794,505	3	11.20%	\$1,097,107	\$10,891,612	\$135,200		*	\$0	\$0	\$11,026,812
GA	\$5,121,576	2	12.22%	\$625,857	\$5,747,433	\$31,200		*	\$0	\$0	\$5,778,633
KY	\$4,511,664	4	8.63%	\$389,244	\$4,900,908	\$27,300		*	\$0	(\$3,900)	\$4,924,308
MS	\$1,842,138	2	13.65%	\$251,452	\$2,093,590	\$11,700		*	\$0	\$0	\$2,105,290
NC	\$6,859,039	4	8.67%	\$594,679	\$7,453,718	\$37,700		*	\$0	\$0	\$7,491,418
SC	\$2,623,423	4	8.59%	\$225,221	\$2,848,644	\$27,300		*	\$0	\$0	\$2,875,944
TN	\$3,768,690	2	13.65%	\$514,426	\$4,283,116	\$41,600		*	(\$6,600)	\$0	\$4,318,116
IL	\$11,539,892	1	16.01%	\$1,847,075	\$13,386,967	\$35,100	\$542,246	*	(\$28,800)	\$0	\$13,935,513
IN	\$6,550,783	2	12.61%	\$826,054	\$7,376,837	\$44,200		*	\$0	\$0	\$7,421,037
MI	\$7,906,998	1	14.35%	\$1,134,259	\$9,041,257	\$32,500	\$370,324	*	\$0	(\$60,900)	\$9,383,181
MN	\$7,491,631	3	10.98%	\$822,862	\$8,314,493	\$13,000		*	\$0	\$0	\$8,327,493
OH	\$14,886,467	3	11.42%	\$1,699,848	\$16,586,315	\$58,500	(\$912,570)	*	\$0	\$0	\$15,732,245
WI	\$5,883,514	2	13.13%	\$772,505	\$6,656,019	\$23,400		*	\$0	\$0	\$6,679,419

A	B	C	D	E	F	G	H	I	J	K	L
State	FY 09 State Budget Adjusted	Quintile	Baseline increase %	Baseline increase \$	FY 10 State Budget Baseline	State Training Travel	One-Time Adjustments	Valid. Suppl.	Tier 1 Non-Del Deduction	Tier 2 Non-Del Deduction	FY 10 Final State Budget
AR	\$4,404,452	3	11.20%	\$493,354	\$4,897,806	\$29,900		*	\$0	\$0	\$4,927,706
LA	\$4,841,170	1	14.65%	\$709,086	\$5,550,256	\$19,500		*	\$0	(\$8,700)	\$5,561,056
NM	\$1,855,536	3	10.55%	\$195,736	\$2,051,272	\$29,900		*	\$0	\$0	\$2,081,172
OK	\$4,324,214	1	15.86%	\$685,604	\$5,009,818	\$10,400		*	\$0	\$0	\$5,020,218
TX	\$30,213,363	5	6.95%	\$2,100,584	\$32,313,947	\$156,000		*	(\$13,200)	\$0	\$32,469,947
IA	\$2,752,742	1	17.37%	\$478,014	\$3,230,756	\$28,600	\$47,423	*	\$0	\$0	\$3,306,779
KS	\$3,644,149	2	13.91%	\$506,901	\$4,151,050	\$20,800		*	(\$6,600)	(\$17,400)	\$4,147,850
MO	\$9,209,047	3	10.55%	\$971,439	\$10,180,486	\$65,000		*	\$0	\$0	\$10,245,486
NE	\$2,448,949	3	10.33%	\$253,007	\$2,701,956	\$3,900		*	\$0	\$0	\$2,705,856
CO	\$4,603,916	5	7.16%	\$329,410	\$4,933,326	\$33,800		*	\$0	(\$3,900)	\$4,963,226
MT	\$1,714,357	4	7.95%	\$136,249	\$1,850,606	\$14,300		*	\$0	(\$7,800)	\$1,857,106
ND	\$1,336,707	5	7.09%	\$94,739	\$1,431,446	\$3,900		*	\$0	(\$17,400)	\$1,417,946
SD	\$1,327,390	5	6.82%	\$90,495	\$1,417,885	\$7,800		*	\$0	\$0	\$1,425,685
UT	\$1,684,448	2	12.35%	\$208,029	\$1,892,477	\$26,000		*	\$0	\$0	\$1,918,477
WY	\$959,848	4	8.71%	\$83,627	\$1,043,475	\$3,900		*	\$0	\$0	\$1,047,375
AZ	\$3,416,976	3	10.44%	\$356,732	\$3,773,708	\$18,200		*	\$0	\$0	\$3,791,908
CA	\$32,719,453	1	14.35%	\$4,693,606	\$37,413,059	\$561,600		*	(\$22,800)	(\$217,500)	\$37,734,359
HI	\$999,389	4	8.80%	\$87,921	\$1,087,310	\$11,700		*	\$0	\$0	\$1,099,010
NV	\$1,783,105	3	10.82%	\$192,943	\$1,976,048	\$2,600		*	\$0	(\$33,000)	\$1,945,648
AK	\$777,126	4	8.42%	\$65,395	\$842,521	\$10,400		*	\$0	\$0	\$852,921
ID	\$1,540,044	3	11.42%	\$175,854	\$1,715,898	\$13,000		*	\$0	\$0	\$1,728,898
OR	\$3,177,558	3	10.66%	\$338,648	\$3,516,206	\$10,400		*	\$0	\$0	\$3,526,606
WA	\$5,712,428	1	15.86%	\$905,705	\$6,618,133	\$7,800		*	\$0	(\$15,600)	\$6,610,333
Total	\$276,365,042		11.60%	\$32,061,093	\$308,426,135	\$2,033,200	\$108,497	*	(\$74,400)	(\$472,200)	\$310,021,232

*Validation Supplements are determined on a monthly basis
One-Time awards will also be made on a flow basis

Attachment 2 - Non-Delivery Information

NH		HHA	ASC			ESRD			NACC Hosp		
St	# Of Late Surveys	# Of Late Surveys	# Surveys Req 10%	# Surveys Done	# Not Surveyed < 10%	# Target Surveys Reqd 10%	# Target Surveys Done	# Not Surveyed <10%	# Target Surveys Reqd	# Target Surveys Done	# Not Surveyed
CT	0	0	4	12	0	3	4	0	1	1	0
MA	0	0	3	5	0	8	8	0	1	1	0
ME	0	0	2	8	0	2	2	0	2	2	0
NH	0	0	2	3	0	1	2	0	1	1	0
RI	0	0	0	0	0	2	0	2	1	1	0
VT	0	0	0	0	0	1	1	0	1	1	0
NJ	0	0	12	24	0	12	12	0	2	2	0
NY	0	0	4	6	0	23	26	0	6	6	0
PR	0	0	3	3	0	4	1	3	1	1	0
DC	0	0	1	1	0	2	0	2	1	1	0
DE	0	0	1	1	0	2	2	0	0	0	0
MD	1	0	33	45	0	11	14	0	2	2	0
PA	0	0	21	20	1	24	32	0	4	4	0
VA	0	1	5	4	1	14	12	2	2	2	0
WV	0	0	1	5	0	3	3	0	2	2	0
AL	0	1	4	9	0	12	12	0	2	2	0
FL	0	0	28	45	0	31	34	0	4	5	0
GA	0	0	24	34	0	25	29	0	2	3	0
KY	0	0	4	3	1	9	9	0	2	2	0
MS	0	0	5	7	0	7	10	0	2	2	0
NC	0	0	8	14	0	17	22	0	2	2	0
SC	0	0	6	12	0	11	11	0	2	2	0
TN	0	1	15	21	0	14	19	0	2	2	0
IL	3	0	9	14	0	21	23	0	4	4	0
IN	0	0	9	34	0	12	17	0	2	6	0
MI	0	0	6	15	0	16	9	7	2	5	0
MN	0	0	5	6	0	9	10	0	4	5	0
OH	0	0	10	16	0	24	32	0	4	5	0
WI	0	0	4	5	0	11	11	0	2	4	0
AR	0	0	7	12	0	6	7	0	2	3	0
LA	0	0	7	22	0	15	14	1	2	2	0
NM	0	0	2	2	0	3	4	0	1	2	0
OK	0	0	5	5	0	7	7	0	2	2	0
TX	0	0	26	40	0	43	55	0	5	5	0
IA	0	0	1	1	0	6	7	0	1	1	0
KS	0	1	6	19	0	5	3	2	1	1	0
MO	0	0	10	11	0	13	14	0	2	2	0
NE	0	0	4	5	0	3	5	0	1	1	0
CO	0	0	9	8	1	6	7	0	2	2	0
MT	0	0	2	0	2	1	3	0	1	1	0
ND	0	0	2	2	0	2	0	2	0	0	0
SD	0	0	2	3	0	3	3	0	1	1	0
UT	0	0	4	19	0	4	5	0	1	1	0
WY	0	0	2	4	0	1	1	0	1	1	0
AZ	0	0	13	18	0	10	12	0	2	2	0
CA	1	2	55	64	0	47	22	25	4	4	0
HI	0	0	2	5	0	2	3	0	1	1	0
NV	0	0	5	1	4	3	2	1	1	1	0
AK	0	0	1	1	0	0	1	0	1	1	0
ID	0	0	5	6	0	2	2	0	1	1	0
OR	0	0	7	30	0	5	7	0	1	1	0
WA	0	0	19	15	4	6	6	0	1	1	0
5		4	14			47			0		