

CMS Revises Instructions for AOs Conducting Initial Certification Surveys

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On August 23, 2024, the Centers for Medicare & Medicaid Services (CMS), Center for Clinical Standards and Quality (CCSQ) issued a revised memo titled *Transitioning Certification Functions for Changes of Ownership, Administrative Changes, and Initial Enrollment Performed by the SOG Locations*.

The memo describes the CMS' transitioning of certain certification enrollment functions performed by the CMS Survey and Operations Group (SOG) Locations (formerly CMS Regional Offices) to CMS's Center for Program Integrity (CPI) and its Provider Enrollment Oversight Group (PEOG) and to the Medicare Administrative Contractors (MACs). The revision clarifies initial certification processes for providers/suppliers seeking deemed status via a CMS-approved Accrediting Organization (AO). Specifically, for home health and hospice providers, the AO must not conduct an initial survey until the state agency has provided approval to the AO.

- “For initial surveys, specifically for providers and suppliers seeking deemed status through a CMS- approved AO, the provider/supplier will first submit their CMS-855 through the general enrollment process to the MAC, which will copy the AO and SA on the initial approval recommendation based on enrollment. However, the AO will conduct the initial survey. An AO may not conduct an initial certification survey of a prospective provider or supplier for Medicare certification purposes until the MAC has provided its recommendation to the SA and the AO. For transitioned providers/suppliers who are seeking deemed status via a CMS-approved AO, **except for HHAs and Hospices, the AO may conduct the initial survey upon receipt of the MAC recommendation to the SA/AO and a copy of the facility's State license or CON if applicable.**