

Medicare State Operations Manual

Chapter 9 - Exhibits

Exhibits

(Rev. 227; Issued: 12-13-24)

Exhibit	Description	Download
1A	Model Letter Transmitting Materials to Providers	http://www.cms.gov/manuals/downloads/som107c09_exhibits.pdf
1B-1	Model Letter Transmitting CLIA Application and CMS-855 to Laboratories	http://www.cms.gov/manuals/downloads/som107c09_exhibitstoc.pdf
1B-2	Model Letter Transmitting CLIA Application and CMS-1513 to Laboratories	delete
1B-3	Initial Forms Required by Laboratories for CLIA Registration	delete
1C	Model Letter transmitting Forms to Persons Furnishing Portable X-Ray Services	http://www.cms.gov/manuals/downloads/som107_exhibit_001c.pdf
1D	Model Letter Transmitting Materials to Rural Health Clinics	http://www.cms.gov/manuals/downloads/som107_exhibit_001d.pdf
1E	Model Letter to Operational ESRD Facility Requesting Initial Approval	http://www.cms.gov/manuals/downloads/som107_exhibit_001e.pdf
1F	Model Letter Transmitting Title XVIII Materials to Individual Requesting to Participate as a Physical Therapist in Independent Practice	delete
2	Civil Rights Clearance for Medicare Provider Certification	http://www.hhs.gov/ocr/civilrights/resources/providers/medicare_providers/index.html
3	Expression of Intermediary Preference	delete
4	Health Insurance Benefits	http://www.cms.gov/cmsforms/

	Agreement, CMS-1561	
4B	Health Insurance Benefits Agreement, CMS-1561A (Rural Health Clinics)	https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS1561A.pdf
5	Statement of Financial Solvency, CMS-2572	Deleted
6	Ownership and Control Interest Disclosure Statement, CMS-1513	Deleted
6	Errata Sheet to Ownership and Control Interest Disclosure Statement, CMS-1513	Deleted
7	Statement of Deficiencies and Plan of Correction, CMS-2567	https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing-Items/CMS-2567.html
7A	Principles of Documentation	http://www.cms.gov/manuals/downloads/som107_exhibit_007a.pdf
8	Post-Certification Revisit Report, CMS-2567B	http://www.cms.gov/cmsforms/
9	Medicare/Medicaid Certification and Transmittal, CMS-1539	http://www.cms.gov/cmsforms/
10	Certification and Transmittal Spell of Illness Supplement, CMS-1539A	delete
12	Survey Report Form (CLIA), CMS-1557	https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms1557.pdf
14A	Hospital Survey Report - Crucial Data Extract, CMS-1537E	delete
14B	Fire Safety Survey Report - Crucial Data Extract, CMS-2786E	delete
14C	Skilled Nursing Facility and Intermediate Care Facility Crucial Data Extract, CMS-519E	Located in Aspen
14D	Home Health Agency Survey and Deficiencies	Deleted

	Report, CMS-1572	
14H	Outpatient Physical Therapy Survey Report - Crucial Data Extract, CMS-1893E	Located in Aspen
14I	ESRD Facility Survey Report- Crucial Data Extract, Form CMS-3427E (To be used with Part II of Form CMS-3427)	http://www.cms.gov/manuals/downloads/som107_exhibit_014i.pdf
14J	Rural Health Clinic Survey Report - Crucial Data Extract, CMS-30E	Located in Aspen
14K	Intermediate Care Facility - Individuals with Intellectual Disabilities Survey Report- Crucial Data Extract, CMS-3070B(E)	Located in Aspen
14L	Ambulatory Surgical Center Report - Crucial Data Extract, CMS-378E	Located in Aspen
14M	Therapist in Independent Practice - Crucial Data Extract, CMS-3042E	Located in Aspen
14O	Hospice Survey Report - Crucial Data Extract, CMS-449E	Located in Aspen
15	Regional Office Request for Additional Information, CMS-1666	http://www.cms.gov/cmsforms/
16	Budget Request, Clinical Laboratory Improvement Amendments Program, Form CMS-102	https://scclia.cms.gov/SCCLIA/Default.aspx
21	Request For Certification in the Medicare and/or Medicaid Program to Provide Outpatient Physical Therapy and/or Speech Pathology Services, CMS-1856	http://www.cms.gov/cmsforms/

22	Guidance to Distinguish Between the Priorities of Immediate Jeopardy and Non-Immediate Jeopardy-High in Nursing Home Allegations	http://www.cms.gov/manuals/downloads/som107_exhibit_022.pdf
23	ACTS Required Fields	http://www.cms.gov/manuals/downloads/som107_exhibit_023.pdf
24	Model Letter to Ineligible Physical Therapists Requesting to Participate as a Physical Therapist in Independent Practice	delete
25	Model Letter to Rural Health Clinic Regarding Scheduling a Survey	Deleted
26	Model Letter to Rural Health Clinic Ineligible to Participate	http://www.cms.gov/manuals/downloads/som107_exhibit_026.pdf
27	Model Letter to Previously Approved Facility Requesting Approval to Expand or Add a New End Stage Renal Disease (ESRD) Service	http://www.cms.gov/manuals/downloads/som107_exhibit_027.pdf
30	Model Letter to Facility Returning Application not Accompanied by Required Certificate of Need (Where Applicable)	http://www.cms.gov/manuals/downloads/som107_exhibit_030.pdf
31	End Stage Renal Disease Survey Report and Deficiencies Report, CMS-3427	http://www.cms.gov/cmsforms/
32	Model Letter Explaining to Provider That One-Story Protected Wood Frame Facility Does Not Meet Sprinkler Equivalency Standard	delete
33	Request for Validation of Accreditation Survey, CMS-2802	http://www.cms.gov/cmsforms/

35	Survey Material	Deleted
36	Instructions for Completing Hospital Request for Certification in the Medicare/Medicaid Program, CMS-1514 (Contains Authorization Statement for AOA and Joint Commission Hospitals)	delete
37	Model Letter Announcing Validation Survey Of Deemed Status Provider/Supplier	http://www.cms.gov/manuals/downloads/som107_exhibit_037.pdf
38	Model Form for Certification of Chiropractors Where Requirements Prior to July 1, 1974 Apply	delete
39	Model Form for Certification of Chiropractors Where Requirements After June 30, 1974 Apply	delete
41	State Agency's Letter to Medicare SNF Seeking Readmission After Involuntary Termination	http://www.cms.gov/manuals/downloads/som107_exhibit_041.pdf
42	Orientation & Basic Training Program for the Newly Employed Health Facility Surveyor	http://www.cms.gov/manuals/downloads/som107_exhibit_042.pdf
45	State Agency Budget Expenditure Report, CMS-435	https://scclia.cms.gov/SCCLIA/Default.aspx
47	State Agency Budget List of Positions, CMS-1465A of Positions, CMS-1465A	https://scclia.cms.gov/SCCLIA/Default.aspx
52	State Survey Agency Certification Workload Report, CMS-434	https://63.148.94.170/MBESCBES/

54	State Agency Schedule for Equipment Purchases, CMS-1466	https://scclia.cms.gov/SCCLIA/Default.aspx
56	Identification of Extension Units of OPT/OSP Providers, CMS-381	http://www.cms.gov/cmsforms/
57	Model Letter Requesting Identification of Extension Units	http://www.cms.gov/manuals/downloads/som107_exhibit_057.pdf
58	Example of a Regular Disallowance Letter	http://www.cms.gov/manuals/downloads/som107_exhibit_058.pdf
59	Example of a Deferral Letter	http://www.cms.gov/manuals/downloads/som107_exhibit_059.pdf
60	Example of a Disallowance Letter for Amounts Previously Deferred	http://www.cms.gov/manuals/downloads/som107_exhibit_060.pdf
61	Example of an Audit Disallowance Letter	http://www.cms.gov/manuals/downloads/som107_exhibit_061.pdf
62	Model Letter - State Agency Advising a Provider or Supplier of an Impending Federal	Deleted
63	List of Documents in Certification Packets (Initial Certifications Include Initial Denials)	http://www.cms.gov/manuals/downloads/som107_exhibit_063.pdf
64	Ambulatory Surgical Center Request for Certification in the Medicare Program, CMS-377	http://www.cms.gov/cmsforms/
65	Health Insurance Benefits Agreement, CMS-370	http://www.cms.gov/cmsforms/
69	Certification Recommendation - CLIA Laboratory, CMS-197	delete
71	Fire Safety Survey Report - Short Form, CMS-2786C	delete
72	Hospice Request for	http://www.cms.gov/cmsforms/

Certification in the Medicare Program, CMS-417

- 73 State Agency Worksheets for Verifying Exclusions from the Prospective Payment System, CMS-437 <http://www.cms.gov/cmsforms/>
- 74 Survey Team Composition and Workload Report, CMS-670 https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107_exhibit_074.pdf
- 75 Medicare/Medicaid Complaint Form, CMS-562 <http://www.cms.gov/cmsforms/>
- 76 Model Letter to Clinics, Rehabilitation Agencies and Public Health Agencies Initially Applying to Serve as Providers of Outpatient Occupational Therapy Services http://www.cms.gov/manuals/downloads/som107_exhibit_076.pdf
- 77 Model Letter to Approved Medicare Clinics, Rehabilitation Agencies and Public Health Agencies that Request to Add Outpatient Occupational Therapy Services http://www.cms.gov/manuals/downloads/som107_exhibit_077.pdf
- 79 Model Letter to Individuals Requesting Participation in Medicare as Occupational Therapists in Independent Practices delete
- 80 Intermediate Care Facility for Individuals with Intellectual Disabilities Survey Report, Form CMS-3070G <http://www.cms.gov/cmsforms/>
- 81 Model Letter Requirements for Swing-Bed Approval in Hospitals http://www.cms.gov/manuals/downloads/som107_exhibit_081.pdf
- 82 Model Letter Approval Notification for Swing-Beds in a Hospital http://www.cms.gov/manuals/downloads/som107_exhibit_082.pdf

83	Model Letter Denial for Swing-Bed Approval In A Hospital	http://www.cms.gov/manuals/downloads/som107_exhibit_083.pdf
83B	Model Letter - Denial For Swing-Bed Approval In A Hospital	delete
84	ESRD Facility Survey Report Form - Addendum, CMS-3427A	delete
85	Long Term Care Facility Application for Medicare and Medicaid, CMS-671	http://www.cms.gov/cmsforms/
87	Extended/Partial Extended Survey Worksheet, CMS-673	http://www.cms.gov/cmsforms/
88	Medication Pass Worksheet, CMS-677	http://www.cms.gov/cmsforms/
89	Offsite Survey Preparation Worksheet, CMS-801	http://www.cms.gov/cmsforms/
91	General Observations of the Facility, CMS-803	http://www.cms.gov/cmsforms/
92	Kitchen/Food Service Observation, CMS-804	http://www.cms.gov/cmsforms/
93	Resident Review Worksheet, CMS-805	http://www.cms.gov/cmsforms/
94	Quality of Life Assessment, CMS-806 A, B, and C	http://www.cms.gov/cmsforms/
95	Surveyor Notes Worksheet, CMS-807	http://www.cms.gov/cmsforms/
96	OSCAR Report 3 (History Facility Profile) and OSCAR Report 4 (Full Facility Profile)	delete
103	Instructions for the Home Health Functional Assessment Instrument (FAI)	http://www.cms.gov/manuals/downloads/som107_exhibit_103.pdf
104	Consent For Home Visit, CMS-36	http://www.cms.gov/cmsforms/
105	State Test Administration	delete

Plan

106	Laboratory Personnel Report (CLIA), CMS-209	https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/CMS-Forms-Items/CMS008840.html
107	Request for Validation Survey of Laboratory, CMS-2802A	delete
108	Laboratory Authorization Form	delete
110	Compliance Warning Letter - Failure to Apply for Certificate	delete
111	Model Letter Notifying Laboratory of Cited Deficiencies and Requesting a Plan of Correction	delete
112	Model Letter - CLIA Requirements Not Met - Laboratory Out of Compliance	delete
113	Model Letter - CLIA Requirements Not Met - Immediate Jeopardy	delete
114	Model Letter Warning CLIA Laboratory of Possible Sanction - Failure to Disclose Financial Interest and Ownership Information	delete
115	Model Letter - Change of Ownership - Laboratories	delete
116	Budget Requests, Clinical Laboratory Improvement Amendments Program - CMS-102	https://scclia.cms.gov/SCCLIA/Default.aspx
117	1465A - State Agency Budget List of Position for CLIA Program	http://63.148.94.170/mbescbes/
118	1466 – CLIA Program State Agency Schedule for Equipment Purchases	https://scclia.cms.gov/SCCLIA/Default.aspx

119	Planned Workload Report, Clinical Laboratory Improvement Amendments Program, CMS-105	https://scclia.cms.gov/SCCLIA/Default.aspx
120	Standard Form 1199A, Direct Deposit Sign-Up Form	delete
121	Payment Management System, SMARTLINK II, User's Manual	Specific Items to Consider When Completing the Form CMS-1557 Deleted
122	OMB Circular No. A-102, Subject: Uniform Administrative Requirements for Grant-In-Aid to State and Local Governments	www.whitehouse.gov/omb/circulars
123	Blood Bank Inspection Checklist and Report, CMS-282 (Form FDA 2609)	delete
124	Laboratory Personnel Report, CMS-114	delete
125	CLIA Laboratory Application, CMS-116	https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/CMS-Forms-Items/CMS012169.html?DLPage=1&DLEntries=10&DLFilter=116&DLSort=0&DLSortDir=ascending
126	Model Letter Accompanying Self-Attestation Worksheets	http://www.cms.gov/manuals/downloads/som107_exhibit_126.pdf
127	Attestation Statement for Exclusion from PPS for Fiscal Year Beginning: (Date)	http://www.cms.gov/manuals/downloads/som107_exhibit_127.pdf
128	Model Consent for Hospice Home Visit	http://www.cms.gov/manuals/downloads/som107_exhibit_128.pdf
129	Hospice Survey and Deficiencies Report, CMS-643	http://www.cms.gov/cmsforms/
130	Model Letter to Entity Seeking Participation in Medicare as a Community	http://www.cms.gov/manuals/downloads/som107_exhibit_130.pdf

	Mental Health Center (CMHC) Providing Partial Hospitalization Services	
131	Community Mental Health Center Crucial Data Extract	http://www.cms.gov/manuals/downloads/som107_exhibit_131.pdf
132	Public Health Service Act- Section 1916(c)(4)	http://www.cms.gov/manuals/downloads/som107_exhibit_132.pdf
133	Health Insurance Benefit Agreement	http://www.cms.gov/manuals/downloads/som107_exhibit_133.pdf
134	Model Letter Transmitting Requirements to a Hospital Requesting a Change in Status to a Critical Access Hospital (CAH)	http://www.cms.gov/manuals/downloads/som107_exhibit_134.pdf
135	Model Letter Transmitting Swing-Bed Approval Notification in a Critical Access Hospital (CAH)	http://www.cms.gov/manuals/downloads/som107_exhibit_135.pdf
136	Request for Survey of 42 CFR §489.20 and 42 CFR §489.24, Essentials of Provider Agreements: Responsibilities of Medicare Participating Hospitals in Emergency Cases, CMS-1541A	http://www.cms.gov/cmsforms/
137	Responsibilities of Medicare Participating Hospitals in Emergency Cases Investigation Report, CMS-1541B	http://www.cms.gov/cmsforms/
138	EMTALA Physician Review Worksheet	http://www.cms.gov/manuals/downloads/som107_exhibit_138.pdf
139	Model Letter to Provider (Send with Form CMS- 2567)(Immediate Jeopardy Does Not Exit)	http://www.cms.gov/manuals/downloads/som107_exhibit_139.pdf
140	Model Letter Notifying Provider of Acceptance of	http://www.cms.gov/manuals/downloads/som107_exhibit_140.pdf

Allegation of Compliance

- 141 Model Letter Notifying Provider of Results of Revisit http://www.cms.gov/manuals/downloads/som107_exhibit_141.pdf
- 142 Model Letter to Provider (Imposition of Remedies) (Immediate Jeopardy Does Not Exist) http://www.cms.gov/manuals/downloads/som107_exhibit_142.pdf
- 143 Model Letter to Provider (Imposition of Remedies) (Immediate Jeopardy Exists) http://www.cms.gov/manuals/downloads/som107_exhibit_143.pdf
- 144 Notice of Imposition of a Civil Money Penalty (Insert to formal notice) http://www.cms.gov/manuals/downloads/som107_exhibit_144.pdf
- 145 Notification of Change in the Amount of the Civil Money Penalty http://www.cms.gov/manuals/downloads/som107_exhibit_145.pdf
- 146 Notice of Receipt of the Written Request of Waiver of Right to a Hearing http://www.cms.gov/manuals/downloads/som107_exhibit_146.pdf
- 147 Notice of Payment Amount Due and Payable http://www.cms.gov/manuals/downloads/som107_exhibit_147.pdf
- 147A Notice Of Payment Amount Due For Placement In Escrow (Idr Complete Or Not Timely Requested-Facility Is Filing Formal Appeal) http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_147A.pdf
- 148 Notification of Deduction of Civil Money Penalty from Money Owing to the Provider http://www.cms.gov/manuals/downloads/som107_exhibit_148.pdf
- 149 Model Letter Critical Access Hospital (CAH) Denial for Medicare Participation http://www.cms.gov/manuals/downloads/som107_exhibit_149.pdf
- 150 Model Letter Critical Access Hospital (CAH) Approval Notification http://www.cms.gov/manuals/downloads/som107_exhibit_150.pdf
- 151 Model Letter Request For A http://www.cms.gov/manuals/downloads/som107_exhibit_151.pdf

	Plan of Correction Following an Initial Critical Access Hospital (CAH) Survey	<u>bit_151.pdf</u>
152	Model Letter Critical Access Hospital (CAH) Termination Letter	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_152.pdf</u>
153	Notice of Technical Denial - Certificate of Need Denied	Deleted
154	Notice of Initial Approval of End - State Renal Disease (ESRD) Facility	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_154.pdf</u>
155	End-Stage Renal Disease (ESRD) Denial Notice	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_155.pdf</u>
156	Provider Tie-In Notice, CMS-2007	<u>http://www.cms.gov/cmsforms/</u>
157	Notice - Expansion and/or Additional Service (Approval, Partial Approval or Denial) of ESRD Facility	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_157.pdf</u>
158	Notice - Recertification of ESRD Facility (Not Used for Special Purpose Renal Dialysis Facilities)	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_158.pdf</u>
159	List of VA Hospitals Having Sharing Arrangements with Participating ESRD Hospitals	Delete
160	Notice to ESRD Facility - Alternative Sanction for failure to participate with Network Goals and Objectives	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_160.pdf</u>
161	Notice of Interim Approval of CAPD Services	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_161.pdf</u>
162	Model Letter Request for a Plan of Correction Following an Initial Survey for Swing-Bed Approval in a Hospital	<u>http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_162.pdf</u>

163	Model Letter Termination Letter for Hospital Swing-Bed Services	http://www.cms.gov/manuals/downloads/som107_exhibit_163.pdf
164	RO Adjudication of SA Certification Actions	Delete
165	Notice to a Provider that Agreement Was Accepted	http://www.cms.gov/manuals/downloads/som107_exhibit_165.pdf
165a	Notice to a Deemed Provider/ Supplier that Agreement was Accepted	http://www.cms.gov/manuals/downloads/som107_exhibit_165a.pdf
166	Notice of Approval of Supplier of Services	http://www.cms.gov/manuals/downloads/som107_exhibit_166.pdf
167	CMS-576, CMS-576A, Organ Procurement Organization Application and Agreement	www.cms.hhs.gov/cmsforms/
168	Organ Procurement Organization Report Form	http://www.cms.gov/manuals/downloads/som107_exhibit_168.pdf
169	United Network for Organ Sharing Members	http://optn.org/members/
170	Model Letter: Organ Procurement Organization Denial - Failure to Meet Requirements	http://www.cms.gov/manuals/downloads/som107_exhibit_170.pdf
171	Model Letter: Organ Procurement Organization Denial - Competing Applications	http://www.cms.gov/manuals/downloads/som107_exhibit_171.pdf
172	Model Letter: Organ Procurement Organization Approval	http://www.cms.gov/manuals/downloads/som107_exhibit_172.pdf
173	Model Letter: Organ Procurement Organization Notice of Termination	http://www.cms.gov/manuals/downloads/som107_exhibit_173.pdf
174	Model Letter: Organ Procurement Organization Notice to Public and State Medicaid/Medicare	http://www.cms.gov/manuals/downloads/som107_exhibit_174.pdf

Agencies

175	Model Letter: Organ Procurement Organization Notice to Bordering OPOs	http://www.cms.gov/manuals/downloads/som107_exhibit_175.pdf
176	Model Letter: Organ Procurement Organization Corrective Action Notice	http://www.cms.gov/manuals/downloads/som107_exhibit_176.pdf
177	Attestation Statement for Federally Qualified Health Centers	http://www.cms.gov/manuals/downloads/som107_exhibit_177.pdf
178	Federally Qualified Health Center Crucial Data Extract	delete
179	Information on Medicare Participation/Federally Qualified Health Centers	http://www.cms.gov/manuals/downloads/som107_exhibit_179.pdf
180	Notice to Accredited Psychiatric Hospital of Involuntary Termination	http://www.cms.gov/manuals/downloads/som107_exhibit_180.pdf
181	Notice to Hospital Provider of Involuntary Termination	http://www.cms.gov/manuals/downloads/som107_exhibit_181.pdf
182	Notice of Termination to Supplier	http://www.cms.gov/manuals/downloads/som107_exhibit_182.pdf
183	Model Public Notice of Medicare Termination of Hospital Provider Agreement	http://www.cms.gov/manuals/downloads/som107_exhibit_183.pdf
184	Advertising Order, SF-1143, and Public Voucher for Advertising, SF-1144	delete
185	Model Telegram-Notice of Termination to a Medicaid ICF/IID Following "Look Behind" Survey: Immediate and Serious Threat to Patient Health and Safety	http://www.cms.gov/manuals/downloads/som107_exhibit_185.pdf
186	Sample Memorandum Disallowance Claims for Federal Payments, (Used in Look-Behind Disapprovals)	delete

187	Notification to Previously Approved Supplier of a Pending Termination	http://www.cms.gov/manuals/downloads/som107_exhibit_187.pdf
188	Notification: Voluntary Termination of Provider Agreement Approved	http://www.cms.gov/manuals/downloads/som107_exhibit_188.pdf
189	Notification: Approval of Voluntary Termination of a Supplier	http://www.cms.gov/manuals/downloads/som107_exhibit_189.pdf
190	Notification to Provider That Has Ceased or Is Ceasing Operations	http://www.cms.gov/manuals/downloads/som107_exhibit_190.pdf
191	Notification to Supplier That Has Ceased or is Ceasing Operations	http://www.cms.gov/manuals/downloads/som107_exhibit_191.pdf
192	Acknowledgment of Request for Hearing	http://www.cms.gov/manuals/downloads/som107_exhibit_192.pdf
193	Model Letter Informing PPS-Excluded Hospital/Units that Reverification has Been Approved	Deleted
194	Model Letter Announcing to Deemed, Accredited Provider/Supplier Compliance with all Surveyed Medicare Conditions of Participation, Coverage or Certification after a Sample Validation or Substantial Allegation Survey	http://www.cms.gov/manuals/downloads/som107_exhibit_194.pdf
195	Model Letter Announcing to Deemed, Accredited Provider/Supplier that the Facility Does Not Comply with all the Conditions of Participation, Coverage or Certification and That There is Immediate and Serious Threat to Patient Health and Safety	http://www.cms.gov/manuals/downloads/som107_exhibit_195.pdf
196	Model Letter Announcing	http://www.cms.gov/Regulations-and-

	to Deemed Status Provider/Supplier after a Validation Survey that it does not Comply with all Medicare Conditions	<u>Guidance/Guidance/Manuals/downloads/som107_exhibit_196.pdf</u>
197	Notice to Accredited Hospital Announcing Approval of Plan of Correction and Completion Schedule	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_197.pdf</u>
198	Model Letter Announcing Compliance with all Conditions of Participation after the Effectuation of an Acceptable Plan of Correction	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_198.pdf</u>
199	Model Letter Announcing to Deemed Status Provider/Supplier after a Substantial Allegation Survey that it will Undergo a Full Survey	<u>http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_199.pdf</u>
200	Model Letter Acknowledging Complaint Alleging Noncompliance with 42 CFR 489.24 and/or the Related Requirements of 42 CFR 489.20 Investigation not warranted	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_200.pdf</u>
201	Model Letter Acknowledging Complaint Alleging Noncompliance with 42 CFR 489.24 and/or the Related Requirements of 42 CFR 489.20 Investigation warranted	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_201.pdf</u>
202	Model Letter Requesting QIO Review of a Possible Violation of 42 CFR 489.24	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_202.pdf</u>
203	Model Letter Following Investigation Into Alleged Violation of 42 CFR 489.24 And/Or The Related Requirements of 42 CFR 489.20 Facility In	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_203.pdf</u>

Compliance

- 204 Model Letter For Violation of 42 CFR 489.24: Preliminary Determination Letter (Immediate and Serious Threat) http://www.cms.gov/manuals/downloads/som107_exhibit_204.pdf
- 205 Model Letter For Violation of 42 CFR 489.24 And/Or The Related Requirements of 42 CFR 489.20: Preliminary Determination Letter (90 Day Termination Track) http://www.cms.gov/manuals/downloads/som107_exhibit_205.pdf
- 206 Model Letter To Complainant Following Investigation of Alleged Violation of 42 CFR 489.24 And/Or The Related Requirement of 42 CFR 489.20 Complaint Not Substantiated http://www.cms.gov/manuals/downloads/som107_exhibit_206.pdf
- 207 Model Letter To Complainant Following Investigation of Alleged Violation of 42 CFR 489.24 And/Or The Related Requirements of 42 CFR 489.20 Complaint Substantiated http://www.cms.gov/manuals/downloads/som107_exhibit_207.pdf
- 208 Model Letter For Referring Violation of 42 CFR 489.24 To The Office of Inspector General http://www.cms.gov/manuals/downloads/som107_exhibit_208.pdf
- 209 Model Letter For Referring Violation of 42 CFR 489.24 To The Regional Office for Civil Rights http://www.cms.gov/manuals/downloads/som107_exhibit_209.pdf
- 210 Model Letter For Past Violation of 42 CFR 489.24 And/Or The Related Requirements of 42 CFR 489.20 No Termination http://www.cms.gov/manuals/downloads/som107_exhibit_210.pdf
- 211 Model Letter For Violation of 42 CFR 489.24 And/Or The Related Provisions of http://www.cms.gov/manuals/downloads/som107_exhibit_211.pdf

42 CFR 489.20 Notice of Termination

212	Model Letter Requesting QIO Review of A Confirmed Violation of 42 CFR 489.24 For Purpose of Assessing Civil Monetary Penalties (CMPs) Or Excluding Physicians	http://www.cms.gov/manuals/downloads/som107_exhibit_212.pdf
213	State Test Administration Plan	delete
214	Model Letter Announcing to State Survey Agency the Requirements for Administering the Long Term Care Surveyor Minimum Qualifications Test (SMQT)	http://www.cms.gov/manuals/downloads/som107_exhibit_214.pdf
215	Notification to Provider/Supplier Warning of Possible Termination-- Failure to Disclose Financial Interest and Ownership Information	delete
216	Report on Initial Survey Activity	http://www.cms.gov/manuals/downloads/som107_exhibit_216.pdf
217	Aging Report on Pending Initial Survey Activity	http://www.cms.gov/manuals/downloads/som107_exhibit_217.pdf
218	Prerelease Notification Document	delete
219	Model Audit Disallowance Letter - Title XVIII	http://www.cms.gov/manuals/downloads/som107_exhibit_219.pdf
220	Model Audit Disallowance Letter - Title XIX	http://www.cms.gov/manuals/downloads/som107_exhibit_220.pdf
221	Example of Regular Disallowance Letter	http://www.cms.gov/manuals/downloads/som107_exhibit_221.pdf
222	Audit Clearance Document	http://www.cms.gov/manuals/downloads/som107_exhibit_222.pdf
223	Model Letter Announcing to Deemed, Accredited	http://www.cms.gov/manuals/downloads/som107_exhibit_223.pdf

Provider/Supplier After a
Sample Validation Survey
That It Does Not Comply
with all Conditions of
Participation/Conditions for
Coverage

- 224 Notice to Accredited Laboratory Announcing Approval of Plan of Correction and Completion Schedule for Correcting Deficiencies http://www.cms.gov/manuals/downloads/som107_exhibit_224.pdf
- 225 Model Letter: Announcing Compliance With Applicable CLIA Conditions After A Sample Validation or Substantial Allegation of Noncompliance Survey http://www.cms.gov/manuals/downloads/som107_exhibit_225.pdf
- 226 Accredited Laboratory Allegation(s) Report, CMS-2878A delete
- 227 Model Letter: Announcing to the CLIA-Exempt Laboratory After a Sample Validation or Substantial Allegation of Noncompliance Survey That It Does Not Comply With Application Program Requirements http://www.cms.gov/manuals/downloads/som107_exhibit_227.pdf
- 228 Model Letter: Announcing to the State Laboratory Program, After A Sample Validation or Substantial Allegation of Noncompliance Survey That a CLIA-Exempt Laboratory Does Not Comply With Applicable Program Requirements http://www.cms.gov/manuals/downloads/som107_exhibit_228.pdf
- 229 Model Letter: Announcing to the CLIA-Exempt Laboratory, That CMS Will Seek a Temporary Injunction or Restraining http://www.cms.gov/manuals/downloads/som107_exhibit_229.pdf

Order

- 230 Model Letter: Announcing to the State Laboratory Licensure Program That CMS Will Seek a Temporary Injunction or Restraining Order to Enjoin Continued Operation http://www.cms.gov/manuals/downloads/som107_exhibit_230.pdf
- 231 Model Letter: Announcing to the CLIA-Exempt Laboratory, After a Sample Validation or Substantial Allegation of Noncompliance Survey That It Does Not Comply With Applicable Program Requirements (No Immediate Jeopardy) http://www.cms.gov/manuals/downloads/som107_exhibit_231.pdf
- 232 Model Letter: Announcing to the State Laboratory Program, After a Sample Validation or Substantial Allegation of Noncompliance Survey, That a CLIA-Exempt Laboratory Does Not Comply With Applicable Program Requirements (No Immediate Jeopardy) https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_232.pdf
- 233 Fraud and Abuse - Office of Inspector General, Office of Investigations Field Officer delete
- 234 CLIA Notice of Noncompliance and Proposed Alternative Sanction(s) - No Immediate Jeopardy delete
- 235 Notice of Suspension or Limitation of the CLIA Certification - Immediate Jeopardy. delete
- 236 Notice of Imposition of Sanction(s): Acknowledgment of Information Received delete

- 237 Model Letter: Announcing http://www.cms.gov/manuals/downloads/som107_exhibit_237.pdf
to an Accredited Laboratory After a Sample Validation Survey or a Substantial Allegation of Noncompliance Survey That It Does Not Comply with all CLIA Conditions and That There Exists, Immediate Jeopardy to the Health and Safety of Individuals or That of the General Public
- 238 Model Letter: Announcing http://www.cms.gov/manuals/downloads/som107_exhibit_238.pdf
to an Accredited Laboratory After a Sample Validation Survey That the Laboratory Does Not Comply With All the CLIA Conditions- No Immediate Jeopardy
- 239 Clinical Laboratory Improvement Amendments (CLIA) Alternate Quality Assessment Survey, CMS-667 delete
- 240 Notice of Proposed Limitation of the CLIA Certification and Suspension of Medicare Payments When a Laboratory Has Failed to Participate Successfully in a Proficiency Testing Program delete
- 241 Model Letter: Announcing http://www.cms.gov/manuals/downloads/som107_exhibit_241.pdf
to Accredited Laboratory After a Substantial Allegation of Noncompliance Survey That the Laboratory Does Not Comply With All CLIA Conditions (Complaint)
- 242 Request for Validation of Accreditation Survey for Laboratories, CMS-2802A <https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS2802A.pdf>

243	Model Letter: Announcing to a CLIA Exempt Laboratory That It Is In Compliance With the CLIA Conditions After a Sample Validation or Substantial Allegation of Noncompliance Survey	http://www.cms.gov/manuals/downloads/som107_exhibit_243.pdf
244	Model Letter: Announcing to the State Laboratory Program, That A CLIA-Exempt Laboratory is in Compliance with the CLIA Conditions After a Sample Validation or Substantial Allegation of Noncompliance Survey	http://www.cms.gov/manuals/downloads/som107_exhibit_244.pdf
245	CLIA Adverse Action Extract, CMS-462A/B	delete
246	Model Letter: Regional Office Notifying a State-Operated Laboratory of Cited Deficiencies and Requesting a Plan of Correction	delete
247	Notice of (Limitation or) Revocation of a Laboratory's CLIA Certificate - No Immediate Jeopardy	delete
248	Notice of Proposed Limitation, Suspension, or Revocation of the CLIA Certificate; Opportunity for a Hearing - No Immediate Jeopardy	delete
249	Model Application Letter Notifying Transplant Hospital that a complete Medicare General Enrollment Health Care CMS-855A need to be completed	http://www.cms.gov/manuals/downloads/som107_exhibit_249.pdf
250	Model Application Letter to Transplant Hospital	http://www.cms.gov/manuals/downloads/som107_exhibit_250.pdf

Requiring Partial Medicare
General Enrollment Health
Care CMS-855A

- 251 Model Letter for First Rejection of a Request for Medicare approval of one or more Organ Transplant Programs http://www.cms.gov/manuals/downloads/som107_exhibit_251.pdf
- 252 Model Reminder Letter for First Rejection of a Request for Medicare approval of one or more Organ Transplant Programs http://www.cms.gov/manuals/downloads/som107_exhibit_252.pdf
- 253 Organ Transplant Hospital Worksheet http://www.cms.gov/manuals/downloads/som107_exhibit_253.pdf
- 254 Model Letter: Notification to Applicant that Medicare General Enrollment Health Care Provider/Supplier Application Has Been Denied http://www.cms.gov/manuals/downloads/som107_exhibit_254.pdf
- 255A Notice to Accredited Laboratory Announcing Approval of Plan of Correction and Completion Schedule for Correcting Deficiencies http://www.cms.gov/manuals/downloads/som107_exhibit_255A.pdf
- 256 Form CMS-855 - Medicare and Other Federal Health Care Program General Enrollment Health Care Provider/Supplier Application <http://www.cms.gov/cmsforms/>
- 257 Form CMS-855C - Medicare and Other Federal Health Care Program Change of Information Health Care Provider/Supplier Application <http://www.cms.gov/cmsforms/>
- 258 Form CMS-855R - Medicare and Other Federal Health Care Program Individual Reassignment of

Benefits Health Care
Provider/Supplier
Application

259	Minimum Data Set Automation Contract/Agreement Approval RO Checklist	http://www.cms.gov/manuals/downloads/som107_exhibit_259.pdf
260	MDS Key Field Correction Form	http://www.cms.gov/manuals/downloads/som107_exhibit_260.pdf
261	Privacy Act Statement - Health Care Records	http://www.cms.gov/manuals/downloads/som107_exhibit_261.pdf
262	Overview of MDS Version 2.0 Correction Policy for Locked Records	http://www.cms.gov/manuals/downloads/som107_exhibit_262.pdf
263	Submission Timeframe for MDS Records	http://www.cms.gov/manuals/downloads/som107_exhibit_263.pdf
264	Resident Census and Conditions of Residents - CMS-672	http://www.cms.gov/cmsforms/
265	Roster/Sample Matrix - CMS-802	http://www.cms.gov/cmsforms/
266	Roster/Sample Matrix Provider Instructions (Use with Form CMS-802) - CMS-802P	http://www.cms.gov/manuals/downloads/som107_exhibit_266.pdf
267	Roster/Sample Matrix Instructions for Surveyors (Use with Form CMS-802) - CMS-802S	http://www.cms.gov/manuals/downloads/som107_exhibit_267.pdf
268	Facility Characteristics	http://www.cms.gov/manuals/downloads/som107_exhibit_268.pdf
269	Facility Quality Measure/Indicator Report	http://www.cms.gov/manuals/downloads/som107_exhibit_269.pdf
270	Resident Level Quality Measure/Indicator Report: Chronic Care Sample	http://www.cms.gov/manuals/downloads/som107_exhibit_270.pdf

271	QM/QI Reports Technical Specifications: Version 1.0	http://www.cms.gov/manuals/downloads/som107_exhibit_271.pdf
272	Overview of MDS Submission Record	http://www.cms.gov/manuals/downloads/som107_exhibit_272.pdf
273	Correction Policy Summary Matrix	http://www.cms.gov/manuals/downloads/som107_exhibit_273.pdf
274	Definition of Important Dates in the RAI Process	http://www.cms.gov/manuals/downloads/som107_exhibit_274.pdf
275	Attestation Statement for CMHCs	http://www.cms.gov/manuals/downloads/som107_exhibit_275.pdf
276	Health Insurance Benefit Agreement for CMHCs	Deleted
277	Fiscal Intermediary (FI) Medicare Provider Billing Number Deactivation Letter Used by FI	http://www.cms.gov/manuals/downloads/som107_exhibit_277.pdf
278	Model Denial Letter for CMHC Applicants - State Restrictions on Screening	http://www.cms.gov/manuals/downloads/som107_exhibit_278.pdf
279	Model Letter - Notice of Findings for Noncompliance for CMHCs	http://www.cms.gov/manuals/downloads/som107_exhibit_279.pdf
280	Model Letter - Notice of Termination of Provider Agreement for CMHCs	http://www.cms.gov/manuals/downloads/som107_exhibit_280.pdf
281	Model Letter - CMHC That Has Ceased Operation	http://www.cms.gov/manuals/downloads/som107_exhibit_281.pdf
282	Model Letter - Participation in Medicare as a CMHC Providing Partial Hospitalization Services (Including Threshold and Service Requirements)	http://www.cms.gov/manuals/downloads/som107_exhibit_282.pdf
283	Model Letter - Notice of Failure to Meet Threshold and Service Requirements,	http://www.cms.gov/manuals/downloads/som107_exhibit_283.pdf

CMHCs

- 284 Model Denial Letter - To a Home Health Agency (HHA) That Requested a Branch Office http://www.cms.gov/manuals/downloads/som107_exhibit_284.pdf
- 285 Worksheet for OBQM & OBQI Reports – Pre-Survey Process and Sample Selection http://www.cms.gov/manuals/downloads/som107_exhibit_285.pdf
- 286 Hospital/CAH Medicare Database Worksheet http://www.cms.gov/manuals/downloads/som107_exhibit_286.pdf
- 287 Authorization by Deemed Provider/Supplier Selected for Validation Survey http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_287.pdf
- 288 Surveyor Worksheet For Swing-Beds http://www.cms.gov/manuals/downloads/som107_exhibit_288.pdf
- 289 Model Reciprocal Agreement Between States for Survey and Certification of Home Health Agencies and/or Hospices http://www.cms.gov/manuals/downloads/som107_exhibit_289.pdf
- 290 Model letter to HHAs Assigning Branch Identification Numbers http://www.cms.gov/manuals/downloads/som107_exhibit_290.pdf
- 291 Model Notice to Hospital/CAH of Collection of Data by the State Agency http://www.cms.gov/manuals/downloads/som107_exhibit_290.pdf
- 292 INSTRUCTIONS FOR COMPLETING THE DATA USE AGREEMENT (DUA) FORM CMS-R-0235 http://www.cms.gov/manuals/downloads/som107_exhibit_292.pdf
- 293 CMS DUA: ACTS SOR Attachment - P&A http://www.cms.gov/manuals/downloads/som107_exhibit_293.pdf
- 294 DUA Multi-Signature Addendum http://www.cms.gov/manuals/downloads/som107_exhibit_294.pdf
- 351 Ambulatory Surgical Center http://www.cms.gov/manuals/downloads/som107_exhibit_351.pdf

	Infection Control Surveyor Worksheet	<u>bit_351.pdf</u>
352	Notice to a Provider/supplier that Agreement was not Accepted	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_352.pdf</u>
353	Report of a Hospital Death Associated with Restraint or Seclusion (Form CMS-10455)	<u>http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_353.pdf</u>
354	Model Letter To Involved Resident, Resident Representative And/Or State Ombudsman – Opportunity To Provide Written Comment (Independent Informal Dispute Resolution (Idr) Has Been Requested)	<u>http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_354.pdf</u>
355	Probes and Procedures for Appendix J, Part II- Interpretive Guidelines- Responsibilities of Intermediate Care Facilities for Individuals with Intellectual Disabilities	<u>http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_355.pdf</u>
356	Critical Access Hospital (CAH) Recertification Checklist: Rural and Distance or Necessary Provider Verification	<u>http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_356.pdf</u>
357	<i>Model Letter for a Transplant Program Inactivation</i>	<u>http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_357.pdf</u>
358	Sample Form for Facility Reported Incidents	<u>http://www.cms.gov/manuals/downloads/som107_exhibit_358.pdf</u>

359 Follow-up Investigation
Report

http://www.cms.gov/manuals/downloads/som107_exhibit_359.pdf