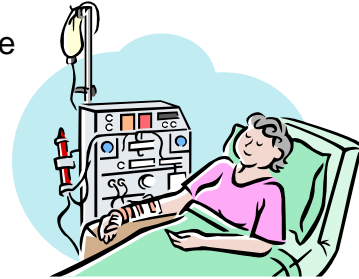

End Stage Renal Disease Facility (ESRDs) Survey Process

Survey protocols and Interpretive Guidelines were established by the Centers for Medicare and Medicaid Services (CMS) to provide guidance to personnel conducting surveys. They serve to clarify, and/or explain, the intent of the federal regulations. All surveyors are required to use this protocol in assessing compliance with requirements. The ESRD facility survey protocols, and federal regulation set, are contained within 42 Code of Federal Regulations (CFR) Part 494, [Appendix H](#), of the CMS State Operations Manual (SOM).



The regulatory requirements are made up of sixteen Conditions for Coverage (CFCs) and each of these Conditions is made up of specific standards. The ESRD facility must be in compliance with all CFC requirements (Conditions), at all times. Below is a brief description of the ESRD facility survey. Please refer to Appendix H for detailed information regarding the ESRD facility survey process.

In order to conduct each survey, during the entrance conference, surveyors will request the following:

1. List of Patients, to include dialysis treatment types (in center, home hemo, PD) and schedules (days and times) for sample selection.
2. List of Staff, to include all of their titles and duties.

Initial Surveys

Providers seeking initial Medicare certification as an ESRD facility must have their application materials approved, by the State Agency and CMS, prior to an initial survey. Once the State Agency receives notification from the Medicare Fiscal Intermediary that the application has been approved, we will contact you to discuss when an initial survey may be done. However, due to limited staffing resources and funding, as well as the requirement to accomplish higher priority work to meet our contractual agreement with CMS, this office is unable to complete initial certification

surveys, now or in the foreseeable future. Please refer to CMS letter, [S&C 08-03 Initial Surveys](#), November 5, 2007, for additional information.

Recertification Surveys

CMS directs the frequency and priority status of ESRD recertification surveys. CMS established priorities and frequencies for FFY 2012 are as follows:

- ✚ Priority One: There currently are no Priority One designations for ESRD facilities.
- ✚ Priority Two: 10% targeted sample - the State surveys 10% of the providers in the state selected from a list provided by CMS.
- ✚ Priority Three: 3.5 year interval - additional surveys are done (beyond Priority Two surveys) to ensure that no more than 3.5 years elapse between surveys for any one particular ESRD facility.
- ✚ Priority Four: 3.0 year average - additional surveys are done (beyond Priority Two and Priority Three surveys) such that all providers in the state are surveyed on average, every 3.0 years.

Follow-up Surveys

The purpose of the follow-up survey is to determine that systemic corrective action have been implemented for the deficiencies cited during the previous survey. A follow-up survey may be conducted at the facility or by phone/mail. An unannounced on-site revisit is mandated when deficiencies are cited at the Condition of Coverage (Condition) level; but may be optional when cited at the standard level.

Complaint Surveys

Anyone may file allegations of provider non-compliance with regulatory requirements. The state agency is required to investigate all such allegations. When a complaint which alleges regulatory non-compliance is received, an unannounced complaint survey is conducted which focuses on the allegations of the complaint. Please refer to SOM [Chapter 5](#) for more specific information regarding the complaint survey process.