Critical Access Hospitals (CAHs)
Continued Efforts over the Past Years

Critical Access Hospitals (CAHs) are required to be in compliance with the Federal requirements set forth in the Medicare Conditions of Participation (CoP) in order to receive Medicare/Medicaid payment. The goal of a CAH survey is to determine if the CAH is in compliance with the CoP set forth at 42 CFR Part 485 Subpart F.

- The most current CAH interpretive guidance, the State Operations Manual (SOM) Appendix W, can be found at – https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107ap_w_cah.pdf

Certification of CAH compliance with the CoP is accomplished through observations, interviews, and document/record reviews. The survey process focuses on a CAH's performance of organizational and patient-focused functions and processes. The CAH survey is the means used to assess compliance with Federal health, safety, and quality standards that will assure that the beneficiary receives safe, quality care and services.

- See *SOM Chapter 2 - The Certification Process* for additional information - https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107c02.pdf

In order to initially become certified as a CAH, a conversion survey is required. Prospective CAHs must first be certified and enrolled as a hospital, and only thereafter, may seek conversion to CAH status.

- Requests from a non-deemed hospital to be certified as a CAH are, therefore, not treated as initial surveys but as conversions, and may be surveyed as a Tier 2, 3, or 4, priority at State option.

- Accrediting Organizations (AOs) with a CMS-approved CAH program are able to conduct a CAH conversion survey.

For CAH recertifications, annually, the RO must request from each State Agency (SA) a list of all CAHs expected to undergo a recertification survey over the next 12 months. This list should include and identify both deemed and non-deemed CAHs. For CAHs that are deemed, the SA reviews the deemed status tab in the Automated Survey Processing Environment (ASPEN) for accreditation dates of CAHs. Prior to the date of an SA or AO CAH recertification survey, the RO must determine whether the CAH meets the status and location requirements.

- Information regarding the *CAH Recertification Checklist: Rural and Distance or Necessary Provider Verification* within the S&C Memo: 16-08-CAH (REVISED 09.02.16) can be found at - https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-16-08.pdf

On August 31, 2018, revisions were made to Appendix W, *Survey Protocol, Regulations and Interpretive Guidelines for CAHs and Swing-Beds in CAHs,* at 42 CFR 485.645, to include the recent Long Term Care (LTC) final rule (81 FR 68871, 82 FR 32260) that included revisions to the special requirements for Hospitals and CAHs with swing-beds.

Updates were also made to the Appendix W interpretive guidelines and survey procedures, with significant revisions to the Survey Protocol section.

- For additional information, see QSO Memo18-26-Hospital-CAH - https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/QSO18-26-Hospital-CAH.pdf