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**Center for Clinical Standards and Quality/ Quality, Safety & Oversight Group**

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**Admin Info: 25-08-CLIA**

**DATE:** July 1, 2025

**TO:** State Survey Agency Directors

**FROM:** Director, Quality, Safety & Oversight Group (QSOG)

**SUBJECT:** Fiscal Year (FY) 2026 Clinical Laboratory Improvement Amendments (CLIA)  
Budget Call Letter

**Memorandum Summary**

- **FY 2026 CLIA Budget Call Letter** – Enclosed is a copy of the FY 2026 CLIA Budget Call Letter
- **State Staffing Targets** – Full Time Equivalent (FTE) allocations are determined based on the workload required to survey each State's laboratory population. State budgets should reflect the cost to perform the workload shown in this budget call.
- **Due Date** – State budget submittals are due to the Centers for Medicare & Medicaid Services (CMS) by August 1, 2025.

**Background**

CMS is providing information and guidelines for determining FY 2026 (October 1, 2025 – September 30, 2026) State Survey Agency (SA) CLIA budgets and projected workloads. Budgets will be established based on the workload expected to be completed by each SA in FY 2026. Budget submissions should demonstrate how the funding allocated to each SA will be used to economically and efficiently complete the CLIA program workload.

The tables in this letter reflect our workload projections for each SA. The funding proposed in this letter is equal to the final FY 2025 approved budgets after removing one-time or temporary increases. For FY 2026, we estimate a workload of approximately 7,933 compliance initial and recertification surveys, 2,505 follow-up/revisit surveys of compliance laboratories, 393 validations of accredited laboratories, 92 follow-up/revisits surveys of accredited laboratories, 215 complaint surveys, and 725 proficiency testing desk reviews. The requirement for validation surveys remains at the level of five percent per two-year survey cycle.

Each SA should continue to work toward meeting the workload targets, as well as the average national productivity standard of 120 surveys per surveyor FTE per year (112 initial/recertification and eight follow-up surveys). The average number of hours per survey should not exceed 14 per survey.

### **Budget Submission**

The SA budget submission includes the Form CMS-102, Form CMS-105, Form CMS-1465A, and an Annual Activity Plan. If funds are budgeted for equipment purchases, a Form CMS-1466 must also be included. The budget forms must be submitted through the Survey and Certification / Clinical Laboratory Improvement Amendments (SC/CLIA) System. Annual Activity Plans should be submitted to [DCLIQSABudget@cms.hhs.gov](mailto:DCLIQSABudget@cms.hhs.gov).

- The Form CMS-102 is a breakout of your SA FY26 CLIA program costs by cost category (salaries, fringe benefits, training, indirect costs, etc.).
- The Form CMS-105 is an estimate of the number of laboratory surveys for each laboratory type the SA expects to complete in FY26.
- The Form CMS-1465A is used for all CLIA funded position approvals. All full time and partial FTE employees must be listed on this form. If the SA is requesting funding for a position that is unfilled, enter “VACANT” under the First Name and Last Name columns. The Total “Funds Required” on the Form CMS-1465A must match the “Total Salaries” on line 3 of the Form CMS- 102.
- The Form CMS-1466 is used to provide detail for equipment purchases included on line 10 of the Form CMS-102 budget request. The total “Net Cost” from the Form CMS-1466 should match the “Equipment Purchases” on line 10 of the Form CMS-102. For purposes of CLIA budget submissions, CMS defines equipment as tangible personal property having a useful life of more than one year and a per unit cost equal to \$500 or greater. All equipment purchases must be pre-approved in the annual budget.
- The Annual Activity Plan is a detailed narrative that includes information and supporting documentation essential to support the annual budget. Please refer to Attachment A for a list of information to include in the Annual Activity Plan.

### **Key Points for FY 2026**

- If the SA requests an increase over the funding allocated in this letter, a detailed description of the types of costs and activities to be funded by the increase must be included in the Annual Activity Plan. An adequate description of the additional costs and justification of the increase is necessary for CMS to process increased funding requests. Please refer to #15 under Appendix A for a description of the information required for budget increase requests.
- CMS will evaluate historical survey completion data in states that request an FTE increase over the prior FY. FTE increases will be considered in light of the most recent CLIA survey completion metrics available.
- The CLIA program funds partial FTEs where the projected workload does not support a full FTE. This approach is necessary to maintain the economy and efficiency of the CLIA program.
- Support work (clerical, non-surveyor professional, and supervisory) is projected using the below ratios:
  - Combined clerical/non-surveyor professional hours are estimated at 3 hours to every

- 4 survey hours
- Supervisory hours are estimated at 1 hour to every 7 survey hours
- SA employee salaries have a significant impact on funding. Please notify CMS when salary changes occur during the budget year. Salary changes should also be detailed in the Annual Activity Plan.
- No amount should be budgeted on the “Training” line 11 of the Form CMS-102. Since the FY2026 Mandatory Surveyor Training is expected to be held virtually, SAs will not have any training included in the FY 2026 budgets.
- All costs expended for the benefit of multiple programs must be allocated between the benefiting programs. For example, the cost of a laptop used to complete both CLIA and state compliance activities must be split between the programs. The method used to allocate the costs should be described in the Annual Activity Plan.
- Laboratory programs in Washington State and New York State (non-physician office laboratories) are exempt from CLIA. Workloads for exempt labs in these States are excluded from the funding allocations in this memo.

**Contact:**

For questions or concerns regarding this memorandum please contact  
DCLIQSABudget@cms.hhs.gov.

**Effective Date:**

Immediately. Please communicate to all appropriate staff within 30 days.

/s/

David R. Wright  
Director, Quality, Safety & Oversight Group

**Attachment(s)**

- A) The Annual Activity Plan
- B) Guidelines and Program Emphases for FY 2026 CLIA Budgets
- C) CLIA FY26 Budget Call Letter Tables

**Resources to Improve Quality of Care:**

*Check out CMS’s new [Quality in Focus](#) interactive video series. The series of 10–15 minute videos are tailored to provider types and aim to reduce the deficiencies most commonly cited during the CMS survey process, like infection control and accident prevention. Reducing these common deficiencies increases the quality of care for people with Medicare and Medicaid.*

*Learn to:*

- *Understand surveyor evaluation criteria*
- *Recognize deficiencies*
- *Incorporate solutions into your facility’s standards of care*

*See the [Quality, Safety, & Education Portal Training Catalog](#), and select [Quality in Focus](#)*

*Get guidance memos issued by the Quality, Safety and Oversight Group by going to [CMS.gov](https://www.cms.gov) page and entering your email to sign up. Check the box next to “CCSQ Policy, Administrative, and Safety Special Alert Memorandums” to be notified when we release a memo.*

## The Annual Activity Plan

The Annual Activity Plan is a written narrative submitted to CMS with the annual budget request. The narrative includes information and supporting documentation essential to support the annual budget. The information listed below should be addressed in the Annual Activity Plan.

- 1. Description of SA CLIA Program** - Describe the SA CLIA program which permits survey and certification work to be done efficiently throughout the year and with an even workload distribution over the 1- and 2-year cycle.
- 2. Names and Titles** - Describe the roles and responsibilities of all employees funded by CLIA and included on the Form CMS-1465A.
- 3. Partial FTEs** - Describe the methodology used to allocate partial FTEs to the CLIA program. If the SA has employees that are partially funded by CLIA, explain in the Annual Activity Plan how the SA will determine the amount of time spent on CLIA activities and allocate the appropriate amount of the employee's salary to the quarterly Form CMS-102 expenditure reports.
- 4. Retirement and Fringe** - Explain how the retirement and fringe benefits are calculated and allocated to the employees on line 5 of the Form CMS-102. If a set percentage is used to allocate the fringe and retirement benefits, the SA should explain how this percentage is derived.
- 5. Travel** - Describe how the Travel portion of the budget on line 6 of the Form CMS-102 was calculated. Provide an estimate of the expected number, type, and extent of trips. For out-of-state travel, indicate the number of trips, purpose, and basis for charges to the CLIA program. Include the basis for charges for all out-of-state travel.
- 6. Communications** - Explain costs included on the Communications line 7 of the Form CMS-102.
- 7. Supplies** - Describe the supplies included on the Supplies line 8 of the Form CMS-102.
- 8. Office Space** - Describe the costs included and the methodology used to allocate Office Space to line 9 of the Form CMS-102.
- 9. Equipment** - Provide a description and justification for all equipment budgeted on line 10 of the Form CMS-102 and included on the Form CMS-1466. Provide the purchase date for all equipment that is being replaced by a newly budgeted equipment purchase. For example, if a new printer is included in the budget on line 10, the SA must include the original date of purchase of the printer that is being replaced.
- 10. Consultants and Contractors** - Provide justification and details of the contracts for amounts budgeted on lines 12 and 13 of the Form CMS-102 for Consultants and Subcontracts
- 11. Miscellaneous** - Describe all miscellaneous expenditures budgeted on line 14 of the Form CMS-102.
- 12. Indirect Costs** - Explanation of how indirect costs are allocated to the CLIA program on lines 17 and 18 of the Form CMS-102. If an indirect cost rate is used, confirm in the Annual Activity Plan that the SA has an approved Indirect Cost Rate Agreement with HHS. Describe the indirect cost base. If an indirect cost rate is not used, provide a description of the indirect cost allocation methodology.

- 13. Budget Increases** - If the SA is requesting an increase over the funding allocated in the Budget Call Letter, a detailed description of the types of costs and activities to be funded by the increase is required. Provide a breakout of the costs included in the increase by the Form CMS-102 cost category. A justification and description of why the increase in funding is required should be included. Provide any data or supporting documentation that supports the increase in funding. Without an adequate description of the additional costs and justification of the increase, CMS will not be able to approve the increased funding request.

## Guidelines and Program Emphases for FY26 CLIA Budgets

### **I. Overview**

The State Agency (SA) budget submissions should cover the period October 1, 2025, through September 30, 2026. The State Operations Manual (SOM), Part VI-Special Procedures for Laboratories, is the technical guide to be used in the preparation of the budget submission.

### **II. Program Emphases**

In FY 2026 workloads will continue to fluctuate. State Agencies should not budget for any major changes to basic administrative functions. The Centers for Medicare & Medicaid Services (CMS) Division of Clinical Laboratory Improvement and Quality (DCLIQ), and SAs should continue to monitor activities to maintain awareness of current practices. CMS will provide ongoing information, guidance and training on policies and procedures.

#### State Agency Performance Review (SAPR)

The CLIA State Agency Performance Review (SAPR) continues as an ongoing activity aimed at promoting optimal SA performance by recognizing sustained proficiency and facilitating improvement. State Agencies are expected to have mechanisms in place to ensure fulfillment of their CLIA program responsibilities. For FY 2026, SAs should continue to evaluate the effectiveness of corrective actions taken in response to their SAPR reviews. DCLIQ may make modifications to the structure or content of the SAPR based on operational experience. DCLIQ will utilize the aggregate findings of the reviews to update and clarify policy and determine national training needs.

#### Proficiency Testing (PT)

State Agencies are provided with funding for PT monitoring and maintaining corresponding policies and procedures. State Agencies should continue PT reviews and follow-ups/revisits in accordance with SOM Chapter 6 § 6042-6063 and § 6278. We estimated the FY 2026 PT Desk Review workload by taking an average of hours and counts from FY 2022 through FY 2024.

#### Laboratory Inquiries and Data Systems Processing

During FY 2026 SAs should anticipate a continued high level of inquiries from CLIA laboratories and continue to adjust to the Quality Improvement and Evaluation System (QIES).

#### QIES/ASPEN for CLIA

State Agencies complete their CLIA data entry workload and report retrievals in the QIES/ASPEN data environment.

#### Certificate Status Changes

The data system processes nearly all status changes as they are entered into the data system. The process may require obtaining additional information from the laboratories such as

verifying laboratory director qualifications. In addition, the process may generate new fees and/or certificates to the laboratories and could result in follow-up phone calls. This is an ongoing activity.

### Accredited Laboratories

The data system continuously receives and updates a significant amount of data from the accrediting organizations. The data collected covers all areas of a laboratory's operations (including dates of inspection) and is used to generate fees and certificates and to measure timeliness of inspections. This process may cause a change in information previously provided and laboratories may inquire with the SA to validate the accuracy of fees and certificate information. In addition, on a weekly basis, an automated letter is sent to any accredited laboratory by the CMS data system that does not have current accreditation affiliation information. In the letter we ask the laboratory to notify the SA to make any necessary corrections to its CLIA information. This is an ongoing activity.

### Survey Scheduling Priorities

In accordance with SOM Chapter 6 § 6102.1, the SA will schedule surveys in the following order of priority:

- Complaint surveys indicating possible immediate jeopardy;
- Laboratories with other complaint investigations pending;
- Initial surveys;
- Recertification surveys;
- Follow-up/Revisit surveys;
- Validation (non-complaint) surveys;
- Special Surveys for Certificate of Waiver and Provider Performed Microscopy Laboratories.

### Validation Surveys

The SA conducts validation surveys in accordance with SOM Chapter 6 § 6150 – 6228.

### Biennial Inspections

Laboratories will continue to be subject to surveys every two years. State Agencies should be performing surveys in accordance with SOM Chapter 6 § 6100-6140 at the average national productivity standard of 120 surveys per surveyor full-time equivalents (FTEs) per year (112 initial/recertification and eight follow- up surveys). Initial surveys of new compliance laboratories should be performed in accordance with SOM Chapter 6 § 6102.

Selection for survey of compliance laboratories should continue to be made only after verification of payment of compliance fees. **“CASPER REPORT 80”** is available to assist SAs with validating these payments and enables any SA to identify those compliance laboratories, application type 1, that have paid their compliance fees, whether initial or recertification.

### Announced Surveys



Budget projections continue to be based on the premise of announcing certification surveys up to two weeks prior to the survey date at all CLIA laboratories (complaint and follow-up/revisit surveys will not be announced). Validation surveys are generally announced unless performed simultaneously with an AO survey, which may be unannounced (SOM Chapter 6 § 6106).

### Surveyor Productivity

Ten surveys per surveyor FTE per month (13.3 average hours per survey) will remain the **minimum** standard for FY 2026. Surveyors should expect to meet the target of 120 surveys (112 initial/recertification and 8 follow-up surveys) per surveyor FTE per year. **Any SA performing below the FY 2026 target should identify in its budget submission what steps will be taken to increase surveyor productivity.**

We recommend that you contact other SAs to identify potential best practices that can be used to increase productivity. The SA must keep accurate 670-hour records to ensure CLIA fees are calculated correctly.

### Training

No training costs should be budgeted for FY 2026.

### Accredited/CLIA Exempt Laboratories

In preparing your budget please note that the following accrediting organizations are currently recognized as meeting CLIA requirements for approved accrediting organizations: The Accreditation Commission for Health Care (ACHC), Association for the Advancement of Blood & Biotherapies (AABB), The Commission on Office Laboratory Accreditation (COLA), College of American Pathologists (CAP), The Joint Commission (TJC), The American Society for Histocompatibility and Immunogenetics (ASHI) and American Association for Laboratory Accreditation (A2LA) Together these organizations oversee the entire CLIA accredited laboratory population. Only Washington State and New York State (non-physician office laboratories) have been granted CLIA exempt status at this time.

Approximately **five** percent of the laboratories accredited by the approved laboratory accreditation organizations are surveyed as part of the validation survey process conducted during each two-year cycle. State Agencies are expected to survey accredited facilities no more than 90 days after the accrediting organization inspection and must ensure that laboratories within each schedule type are included to the extent possible. Actual workloads may vary from the level projected as we continue to reconcile the CLIA database to accrediting organizations. State Agencies should follow the validation survey process for selection and survey of these labs.

### Enforcement Process

We continue to focus on promoting an educational approach to facilitate survey deficiency corrections. State Agencies are required to enter enforcement data into the Aspen system timely.

### Waived Laboratories

Laboratories with a Certificate of Waiver may be surveyed if a complaint is received.

### Provider Performed Microscopy (PPM)

Laboratories holding a preferred provider microscopy (PPM) certificate will not be subject to routine inspection. Laboratories meeting the requirements for the PPM Certificate will be subject to a survey where complaints are filed or if there is reason to believe the laboratory is conducting tests beyond its certificate. PPM tests conducted in laboratories with a compliance certificate may have PPM tests included in the survey sample.

### Survey Priorities

Unless otherwise specified in this instruction SAs should follow the SOM, Chapter 6-Special Procedures for Laboratories, in developing survey schedule priorities. Recertification surveys should be prioritized by the date of the last recertification survey. Laboratories with the largest time gap since the last recertification survey should be surveyed first.

### Administrative/Support Staffing

For FY 2026, CMS is maintaining the overall administrative/support hours at 3 hours for every 4 survey hours. All budget submissions must clearly document the number of supervisory, surveyor, non-surveyor professional and clerical staff, as well as the FTE equivalents for these categories.

### Computer Equipment

For FY 2026, we will continue to closely monitor computer equipment purchases. State Agencies with more than two computers in use should spread purchases over multiple years to minimize the budgetary impact on any single fiscal year.

A SA sharing equipment charged to the CLIA program with another State program must ensure that appropriate cost allocation methodologies are applied to ensure proper expensing of equipment.

CMS will closely evaluate each request for equipment and propose approval for those items that are necessary for maintaining adequate access to CLIA data systems needed to process reports and browse CLIA payments. State Agency requests for computer equipment and related software will be given first priority. All other non-computer equipment requests should be adequately justified.

Planned purchases of computer and peripheral items with processing or other capabilities substantially in excess of the CLIA data systems requirements should not be approved.

### Encryption Policy

CMS' encryption policy requires all agency data be protected from unauthorized access. There may be various levels of protection for agency data, but for personally identifiable information (PII), the policy states that dissemination of such data using any portable devices or recordable media, (e.g., CDs, DVDs, Cartridges, Diskettes, Laptops, External Hard Drives, USB Memory Sticks or thumb drives, etc.), requires encryption. Whole disk encryption of the hard-drive for Laptops or Tablet PCs must be employed. Encryption is the process of protecting stored or transmitted information with a password (key) so that it is indecipherable until the intended recipient uses the password to access it.

In accordance with the CMS encryption policy, all workstations with installed CMS data

system components must have encryption software installed that meets or exceeds the standards set forth in the “CMS Information Security Acceptable Risk Safeguards (ARS)”. This includes all CMS data systems components installed on Laptop/Tablet PCs as well as any removable media and/or cloud computing used to disseminate PII/PHI. Specifically, the following sections of the ARS should be referenced:

- IA-7 Cryptographic Module Authentication (Specifies acceptable encryption type – FIPS 140- 2 compliant (<https://nvd.nist.gov/800-53/Rev4/control/IA-7>) NIST validated module. (<https://csrc.nist.gov/projects/cryptographic-module-validation-program> )
- IA-2 User Identification and Authentication
- AC-3 Access Enforcement
- AC-4 Information Flow; specifically CMS-2
- AC-19 Access Control for Portable and Mobile Systems (encryption requirement only)
- MP-5 Media Transport
- SC-8 Transmission Integrity
- SC-12 Cryptological Key Establishment and Management

*Please note, in addition to these encryption sections, agencies are encouraged to review the entire ARS as a guideline for enterprise-wide security practices. States are responsible for ensuring that encryption software has the capability of creating encrypted files that are self-extracting with a password key.*

Additionally, some SAs may have home-based staff using QIES software installed on home workstations. Such home-based systems must be protected with encryption software as described above and comply with CMS controls as defined in the ARS.

Minimum and Recommended Client Requirements: EXISTING or NEW EQUIPMENT		
Component	Minimum	Minimum or Higher Required for Survey Process Implementation Recommended for Other
<i>Processor</i>	Intel/AMD (or equivalent) @ 2.5 GHz	Intel/AMD (or equivalent) @ 3.5 GHz or higher
<i>Memory (RAM)</i>	16GB	32 GB or higher
<i>Available Disk Space</i>	500 GB on SATA 2 drive at 7200 RPM or 500 GB SSD	1 GB SSD or higher
<i>Operating System*</i>	Windows 10 – 64 bit Windows 11 – 64 bit	Windows 11 – 64 bit
<i>Secure Access/Encryption (See Encryption Policy)</i>	Required – See Encryption Policy	Required – See Encryption Policy
<i>Anti-virus</i>	Current License	Current License
<i>Universal Serial Bus Port</i>	One	Two
<i>Removable Media (see Encryption Policy)</i>	USB Drives	USB Drives
<i>Pointing Device</i>	Mouse or equivalent (e.g. trackball or touchpad)	Mouse or equivalent (e.g. trackball or touchpad) and Pen/Stylus for tablet
<i>Network Interface Card (See CMS ARS security guidelines for acceptable wireless configurations)</i>	Wired for network connectivity; and wireless network cards must support WPA-2 level encryption	Wired for network connectivity; and wireless network cards must support WPA-2 level encryption
<i>Audio</i>	Standard built-in speakers	Attachable microphone and standard built-in speakers
<i>Battery (laptop or tablet)</i>	6-cell lithium-ion	6-cell lithium-ion
<i>QIES Browser**</i>	Microsoft Edge, Chrome	Microsoft Edge, Chrome

**Note: Windows Operating systems need to be current with all Windows security updates.**

\*\* Windows 10 will reach End-Of-Life (EOL) October 14, 2025, after which time it can no longer be used in QIES system.

Per the Windows 10 Home and Pro Lifecycle Policy FAQ (<https://learn.microsoft.com/en-us/lifecycle/products/windows-10-home-and-pro>), only the Microsoft Edge or Chrome will receive technical support and security updates.

\* States considering implementing Windows 11 should carefully evaluate CMS software with this Operating System before full-scale deployment.

## Internet Quality Improvement Evaluation System (iQIES)

The Internet Quality Improvement and Evaluation System (iQIES) is the centralized data platform supporting CMS' Survey and Certification (S&C) program. As the authoritative source for Medicare, Medicaid, and Clinical Laboratory Improvement Amendments of 1974 (CLIA) provider data, iQIES plays a critical role in ensuring the delivery of safe, high-quality care across the healthcare continuum.

iQIES streamlines the collection, validation, and analysis of provider and beneficiary data to support regulatory compliance and drive quality improvement across seventeen care settings. Through this web-based system, CMS and State Survey Agencies can efficiently manage provider oversight, monitor trends, and take timely, data-driven action to protect patient safety and uphold healthcare standards.

Designed with users in mind, iQIES delivers intuitive workflows, robust reporting capabilities, and seamless integration of data to enable smarter decision-making and improved outcomes for the nation's most vulnerable populations.

<b>iQIES Minimum and Recommended System Requirements: EXISTING or NEW EQUIPMENT</b>		
<b>Component</b>	<b>Minimum</b>	<b>Minimum or Higher Required for Survey Process Implementation Recommended for Other</b>
<i>Processor</i>	Intel/AMD (or equivalent) @ 2.5 GHz	Intel/AMD (or equivalent) @ 3.5 GHz or higher
<i>Memory (RAM)</i>	16 GB	64GB
<i>Available Disk Space</i>	512 GB on SATA 2 drive at 7200 RPM or SSD	1 GB SSD
<i>Monitor</i>	Desktop 19": Flat Panel 1920 x 1080 screen resolution. For laptop or tablet 13" by 1920 x 1080 screen resolution	Desktop 19": Flat Panel 1920 x 1080 screen resolution. For laptop or tablet 14" or higher by 1920 x 1080 screen resolution.
<i>Operating System*</i>	Windows 10-64 bit Windows 11- 64 bit	Windows 11- 64 bit
<i>Secure Access/Encryption (See Encryption Policy)</i>	Required – See Encryption Policy	Required – See Encryption Policy
<i>Anti-virus</i>	Current License	Current License
<i>Universal Serial BusPort</i>	One	Two
<i>Removable Media (see Encryption Policy)</i>	USB Drive	USB Drives
<i>Pointing Device</i>	Mouse or equivalent (e.g. trackball or touchpad)	Mouse or equivalent (e.g. trackball or touchpad) and Pen/Stylus for TabletPC
<i>Network Interface Card (See CMS ARS security guidelines for acceptable wireless configurations)</i>	Wired for network connectivity; and Wireless network cards must support WPA-2 level encryption	Wired for network connectivity; and Wireless network cards must support WPA-2 level encryption

<i>Internet Connection</i>	1 Mbps modem	High-speed/broadband
<i>Battery (laptop or Tablet PC)</i>	6-cell lithium-ion	6-cell lithium-ion
<i>Browser**</i>	<i>Chrome, Microsoft Edge</i>	<i>Chrome, Microsoft Edge</i>

\*\* Windows 10 will reach End-Of-Life (EOL) October 14, 2025, after which time it can no longer be used in QIES system.

Per the Windows 10 Home and Pro Lifecycle Policy FAQ (<https://learn.microsoft.com/en-us/lifecycle/products/windows-10-home-and-pro>), only the Microsoft Edge or Chrome will receive technical support and security updates.

\* States considering implementing Windows 11 should carefully evaluate CMS software with this Operating System before full-scale deployment.

Note: Operating systems need to be current with all Windows security updates. Make sure your browser is the most current version. Browser settings to make sure both JavaScript and cookies enabled.

## Attachment C

Table 1 Certificate of Compliance Projected FY26 Workload

State	Certificate of Compliance					Total CoC Survey Hours
	Initial/Recert Count	Initial/Recert Hours	Followup/Revisit Count	Followup/Revisit Hours	Travel Hours Adjustment	
Alabama	202	2,663	64	282	(182)	2,763
Alaska	30	374	11	47	3	424
Arizona	172	2,109	55	234	20	2,363
Arkansas	175	2,334	56	248	74	2,656
California	763	9,365	243	1,025	262	10,651
Colorado	155	1,863	49	202	(2)	2,063
Connecticut	91	1,080	29	119	(20)	1,179
Delaware	24	270	7	28	(35)	263
District of Columbia	8	85	2	8	(12)	81
Florida	647	7,566	207	853	176	8,596
Georgia	272	3,471	85	367	156	3,994
Hawaii	20	253	5	21	38	312
Idaho	76	990	25	107	(12)	1,084
Illinois	189	2,374	59	257	(92)	2,539
Indiana	100	1,270	31	135	2	1,407
Iowa	135	1,959	42	188	(66)	2,080
Kansas	112	1,576	34	155	208	1,939
Kentucky	161	2,146	51	225	267	2,638
Louisiana	103	1,315	31	132	78	1,525
Maine	25	348	7	30	(19)	359
Maryland	149	1,803	46	191	(173)	1,821
Massachusetts	151	1,927	48	213	(111)	2,029
Michigan	135	1,691	43	181	(75)	1,798
Minnesota	114	1,500	36	156	16	1,672
Mississippi	230	3,069	74	332	(120)	3,280
Missouri	132	1,750	42	187	-	1,936
Montana	50	680	14	61	(24)	717
Nebraska	96	1,342	30	133	(43)	1,431
Nevada	72	924	22	93	(94)	923
New Hampshire	28	374	7	30	(10)	394
New Jersey	207	2,443	65	269	(64)	2,648
New Mexico	25	294	8	33	35	362
New York	372	4,402	117	482	5	4,889
North Carolina	289	3,541	92	394	(114)	3,821
North Dakota	26	389	8	37	41	467
Ohio	122	1,509	39	165	(116)	1,557
Oklahoma	92	1,276	29	130	38	1,444
Oregon	107	1,411	32	142	44	1,597
Pennsylvania	183	2,332	60	258	(71)	2,519
Puerto Rico	448	6,503	143	652	(31)	7,124
Rhode Island	17	185	5	20	(12)	193
South Carolina	135	1,673	42	177	59	1,909
South Dakota	47	614	14	60	(8)	666
Tennessee	261	3,414	84	379	(159)	3,634
Texas	476	5,968	152	649	485	7,102
Utah	117	1,421	36	150	(189)	1,382
Vermont	9	115	1	4	11	130
Virginia	193	2,444	61	263	173	2,880
West Virginia	42	594	12	52	(9)	637
Wisconsin	131	1,831	41	181	(184)	1,828
Wyoming	29	373	9	39	7	418
<b>Totals</b>	<b>7,933</b>	<b>101,204</b>	<b>2,505</b>	<b>10,774</b>	<b>151</b>	<b>112,130</b>

## data sources

- April 2025 count of Certificates of Compliance by schedule code
- FY24/FY23 survey hour averages by schedule code from Aspen Regional Office System
- FY24/FY23 travel hour averages by state from Aspen Regional Office System

Table 2 Certificate of Accreditation Projected FY26 Workload

State	Certificate of Accreditation					Total CoA Survey Hours
	Validation Count	Validation Hours	Followup/Revisit Count	Followup/Revisit Hours	Travel Hours Adjustment	
Alabama	8	198	2	16	(7)	208
Alaska	1	25	-	-	0	25
Arizona	8	198	2	16	1	216
Arkansas	4	99	1	8	2	109
California	31	769	8	66	10	845
Colorado	6	149	1	8	(0)	157
Connecticut	3	74	1	8	(1)	82
Delaware	1	25	-	-	(1)	24
District of Columbia	1	25	-	-	(1)	24
Florida	32	794	8	66	8	868
Georgia	13	322	3	25	7	354
Hawaii	1	25	-	-	2	26
Idaho	2	50	-	-	(0)	49
Illinois	14	347	3	25	(6)	366
Indiana	9	223	2	16	0	240
Iowa	3	74	1	8	(2)	81
Kansas	4	99	1	8	7	115
Kentucky	5	124	1	8	8	140
Louisiana	10	248	2	16	7	272
Maine	1	25	-	-	(1)	24
Maryland	6	149	1	8	(6)	151
Massachusetts	7	174	2	16	(5)	185
Michigan	11	273	3	25	(6)	292
Minnesota	11	273	3	25	1	299
Mississippi	4	99	1	8	(2)	105
Missouri	6	149	1	8	-	157
Montana	1	25	-	-	(0)	24
Nebraska	2	50	-	-	(1)	49
Nevada	3	74	1	8	(4)	79
New Hampshire	1	25	-	-	(0)	25
New Jersey	7	174	2	16	(2)	188
New Mexico	3	74	1	8	4	87
New York	3	74	1	8	0	83
North Carolina	18	446	4	33	(7)	473
North Dakota	2	50	-	-	2	52
Ohio	16	397	4	33	(14)	415
Oklahoma	7	174	2	16	3	193
Oregon	3	74	1	8	1	84
Pennsylvania	12	298	3	25	(4)	318
Puerto Rico	2	50	-	-	(0)	49
Rhode Island	1	25	-	-	(1)	24
South Carolina	9	223	2	16	4	243
South Dakota	3	74	1	8	(1)	82
Tennessee	9	223	2	16	(5)	235
Texas	64	1,587	16	132	62	1,781
Utah	4	99	1	8	(6)	101
Vermont	1	25	-	-	1	26
Virginia	10	248	2	16	8	273
West Virginia	2	50	-	-	(0)	49
Wisconsin	7	174	2	16	(10)	180
Wyoming	1	25	-	-	0	25
<b>Totals</b>	<b>393</b>	<b>9,746</b>	<b>92</b>	<b>759</b>	<b>46</b>	<b>10,551</b>

data sources

- April 2025 count of Certificates of Accreditation by schedule code
- FY24/FY23 survey hour averages by schedule code from Aspen Regional Office System
- FY24/FY23 travel hour averages by state from Aspen Regional Office System



**Table 3 Complaint Surveys Projected FY26 Workload**

State	Complaint Surveys			
	Complaint Count	Complaint Hours	Travel Hours Adjustment	Total Complaint Survey Hours
Alabama	3	64	(2)	62
Alaska	-	-	-	-
Arizona	3	64	0	65
Arkansas	3	64	1	65
California	2	43	1	43
Colorado	2	43	(0)	43
Connecticut	2	43	(0)	43
Delaware	-	-	-	-
District of Columbia	-	-	-	-
Florida	20	430	4	434
Georgia	11	236	5	241
Hawaii	-	-	-	-
Idaho	2	43	(0)	43
Illinois	12	258	(4)	253
Indiana	5	107	0	107
Iowa	3	64	(1)	63
Kansas	1	21	1	23
Kentucky	4	86	5	91
Louisiana	6	129	4	132
Maine	1	21	(1)	21
Maryland	-	-	-	-
Massachusetts	-	-	-	-
Michigan	12	258	(5)	253
Minnesota	7	150	1	151
Mississippi	4	86	(2)	84
Missouri	9	193	-	193
Montana	9	193	(3)	190
Nebraska	-	-	-	-
Nevada	3	64	(3)	61
New Hampshire	4	86	(1)	85
New Jersey	3	64	(1)	64
New Mexico	7	150	7	158
New York	2	43	0	43
North Carolina	3	64	(1)	64
North Dakota	1	21	1	23
Ohio	6	129	(4)	125
Oklahoma	1	21	0	22
Oregon	5	107	2	109
Pennsylvania	2	43	(1)	42
Puerto Rico	-	-	-	-
Rhode Island	1	21	(1)	21
South Carolina	-	-	-	-
South Dakota	-	-	-	-
Tennessee	8	172	(4)	168
Texas	30	645	23	668
Utah	1	21	(1)	20
Vermont	1	21	1	23
Virginia	2	43	1	44
West Virginia	1	21	(0)	21
Wisconsin	11	236	(12)	225
Wyoming	2	43	0	43
<b>Totals</b>	<b>215</b>	<b>4,619</b>	<b>11</b>	<b>4,631</b>

data sources

- FY24/FY23 complaint survey count and hours by state from Aspen Regional Office System
- FY24/FY23 travel hour averages by state from Aspen Regional Office System

Table 4

## Proficiency Testing Deficiencies Projected FY26 Workload

State	Proficiency Testing	
	PT Desk Reviews	PT Hours
Alabama	21	82
Alaska	8	31
Arizona	10	39
Arkansas	26	101
California	12	47
Colorado	20	78
Connecticut	2	8
Delaware	1	4
District of Columbia	-	-
Florida	13	51
Georgia	48	187
Hawaii	-	-
Idaho	12	47
Illinois	22	86
Indiana	11	43
Iowa	29	113
Kansas	16	62
Kentucky	40	155
Louisiana	6	23
Maine	1	4
Maryland	3	12
Massachusetts	5	19
Michigan	13	51
Minnesota	9	35
Mississippi	62	241
Missouri	13	51
Montana	7	27
Nebraska	11	43
Nevada	4	16
New Hampshire	-	-
New Jersey	12	47
New Mexico	5	19
New York	35	136
North Carolina	15	58
North Dakota	9	35
Ohio	2	8
Oklahoma	18	70
Oregon	14	54
Pennsylvania	10	39
Puerto Rico	11	43
Rhode Island	-	-
South Carolina	16	62
South Dakota	3	12
Tennessee	40	155
Texas	69	268
Utah	6	23
Vermont	2	8
Virginia	16	62
West Virginia	8	31
Wisconsin	3	12
Wyoming	6	23
<b>Totals</b>	<b>725</b>	<b>2,818</b>

data source

- FY24/FY23 Proficiency Testing Desk Review count and hours by state from Aspen Regional Office System

Table 5 FTE Projections FY26

State	Total Survey Hours	Clerical/Non-Surveyor Professional Hours	Supervisory Hours	Surveyor FTE	Clerical/Non-Surveyor Professional FTE	Supervisory FTE	Total FTE
Alabama	3,116	2,337	445	2.08	1.34	0.25	3.67
Alaska	480	360	69	0.32	0.21	0.04	0.57
Arizona	2,683	2,012	383	1.79	1.15	0.22	3.16
Arkansas	2,932	2,199	419	1.95	1.26	0.24	3.45
California	11,586	8,690	1,655	7.72	4.97	0.95	13.64
Colorado	2,341	1,755	334	1.56	1.00	0.19	2.75
Connecticut	1,312	984	187	0.87	0.56	0.11	1.54
Delaware	290	218	41	0.19	0.12	0.02	0.34
District of Columbia	105	79	15	0.07	0.04	0.01	0.12
Florida	9,948	7,461	1,421	6.63	4.26	0.81	11.71
Georgia	4,776	3,582	682	3.18	2.05	0.39	5.62
Hawaii	338	253	48	0.23	0.14	0.03	0.40
Idaho	1,223	917	175	0.82	0.52	0.10	1.44
Illinois	3,243	2,432	463	2.16	1.39	0.26	3.82
Indiana	1,797	1,348	257	1.20	0.77	0.15	2.11
Iowa	2,338	1,753	334	1.56	1.00	0.19	2.75
Kansas	2,139	1,604	306	1.43	0.92	0.17	2.52
Kentucky	3,025	2,268	432	2.02	1.30	0.25	3.56
Louisiana	1,953	1,465	279	1.30	0.84	0.16	2.30
Maine	408	306	58	0.27	0.17	0.03	0.48
Maryland	1,983	1,487	283	1.32	0.85	0.16	2.33
Massachusetts	2,234	1,675	319	1.49	0.96	0.18	2.63
Michigan	2,393	1,795	342	1.60	1.03	0.20	2.82
Minnesota	2,157	1,618	308	1.44	0.92	0.18	2.54
Mississippi	3,711	2,783	530	2.47	1.59	0.30	4.37
Missouri	2,337	1,753	334	1.56	1.00	0.19	2.75
Montana	958	719	137	0.64	0.41	0.08	1.13
Nebraska	1,523	1,142	218	1.02	0.65	0.12	1.79
Nevada	1,078	809	154	0.72	0.46	0.09	1.27
New Hampshire	503	378	72	0.34	0.22	0.04	0.59
New Jersey	2,946	2,210	421	1.96	1.26	0.24	3.47
New Mexico	626	470	89	0.42	0.27	0.05	0.74
New York	5,151	3,863	736	3.43	2.21	0.42	6.06
North Carolina	4,415	3,312	631	2.94	1.89	0.36	5.20
North Dakota	576	432	82	0.38	0.25	0.05	0.68
Ohio	2,105	1,579	301	1.40	0.90	0.17	2.48
Oklahoma	1,729	1,297	247	1.15	0.74	0.14	2.03
Oregon	1,844	1,383	263	1.23	0.79	0.15	2.17
Pennsylvania	2,918	2,189	417	1.95	1.25	0.24	3.43
Puerto Rico	7,217	5,412	1,031	4.81	3.09	0.59	8.49
Rhode Island	238	179	34	0.16	0.10	0.02	0.28
South Carolina	2,215	1,661	316	1.48	0.95	0.18	2.61
South Dakota	760	570	109	0.51	0.33	0.06	0.89
Tennessee	4,193	3,145	599	2.80	1.80	0.34	4.93
Texas	9,819	7,364	1,403	6.55	4.21	0.80	11.56
Utah	1,527	1,145	218	1.02	0.65	0.12	1.80
Vermont	186	140	27	0.12	0.08	0.02	0.22
Virginia	3,259	2,444	466	2.17	1.40	0.27	3.84
West Virginia	738	554	105	0.49	0.32	0.06	0.87
Wisconsin	2,245	1,684	321	1.50	0.96	0.18	2.64
Wyoming	510	382	73	0.34	0.22	0.04	0.60
<b>Totals</b>	<b>130,129</b>	<b>97,597</b>	<b>18,590</b>	<b>86.75</b>	<b>55.77</b>	<b>10.37</b>	<b>153.14</b>

data sources

- Total survey hours from Tables 1,2,3,4
- ratio of administrative/support hours at 75% of survey hours
- ratio of supervisory hours at 14.29% of survey hours
- estimate of productive survey hours per surveyor FTE at 1500 hours per year
- estimate of productive work hours per administrative/support and supervisory FTE at 1750 hours per year

Table 6

## Total FY26 Funding by State Agency

State	Total Hours	Hourly Rate	FY26 Funding
Alabama	5,897	\$ 81.41	\$ 480,085
Alaska	909	\$ 165.22	\$ 150,257
Arizona	5,078	\$ 89.60	\$ 454,969
Arkansas	5,550	\$ 89.26	\$ 495,358
California	21,932	\$ 101.43	\$ 2,224,550
Colorado	4,430	\$ 74.26	\$ 328,985
Connecticut	2,483	\$ 93.05	\$ 231,023
Delaware	550	\$ 113.15	\$ 62,188
District of Columbia	199	\$ 153.80	\$ 30,566
Florida	18,830	\$ 82.86	\$ 1,560,347
Georgia	9,041	\$ 78.72	\$ 711,686
Hawaii	640	\$ 313.87	\$ 200,745
Idaho	2,315	\$ 100.89	\$ 233,579
Illinois	6,139	\$ 173.20	\$ 1,063,293
Indiana	3,401	\$ 78.92	\$ 268,439
Iowa	4,425	\$ 85.10	\$ 376,543
Kansas	4,048	\$ 85.22	\$ 345,005
Kentucky	5,725	\$ 62.67	\$ 358,766
Louisiana	3,696	\$ 162.79	\$ 601,707
Maine	772	\$ 173.82	\$ 134,190
Maryland	3,754	\$ 104.83	\$ 393,489
Massachusetts	4,228	\$ 130.50	\$ 551,827
Michigan	4,529	\$ 100.28	\$ 454,179
Minnesota	4,083	\$ 83.86	\$ 342,381
Mississippi	7,025	\$ 77.54	\$ 544,691
Missouri	4,424	\$ 161.32	\$ 713,737
Montana	1,814	\$ 81.16	\$ 147,239
Nebraska	2,883	\$ 60.26	\$ 173,744
Nevada	2,041	\$ 95.83	\$ 195,572
New Hampshire	953	\$ 137.14	\$ 130,669
New Jersey	5,577	\$ 134.62	\$ 750,725
New Mexico	1,185	\$ 217.17	\$ 257,418
New York	9,750	\$ 180.45	\$ 1,759,364
North Carolina	8,358	\$ 73.96	\$ 618,139
North Dakota	1,091	\$ 96.64	\$ 105,425
Ohio	3,984	\$ 114.21	\$ 455,059
Oklahoma	3,273	\$ 150.03	\$ 491,044
Oregon	3,491	\$ 170.04	\$ 593,590
Pennsylvania	5,524	\$ 114.19	\$ 630,741
Puerto Rico	13,660	\$ 37.62	\$ 513,930
Rhode Island	451	\$ 183.43	\$ 82,799
South Carolina	4,192	\$ 70.15	\$ 294,084
South Dakota	1,438	\$ 69.37	\$ 99,760
Tennessee	7,936	\$ 104.71	\$ 830,992
Texas	18,587	\$ 110.88	\$ 2,060,888
Utah	2,890	\$ 117.98	\$ 341,007
Vermont	352	\$ 131.19	\$ 46,235
Virginia	6,169	\$ 86.33	\$ 532,566
West Virginia	1,398	\$ 194.92	\$ 272,424
Wisconsin	4,250	\$ 101.82	\$ 432,695
Wyoming	965	\$ 102.48	\$ 98,915
<b>Totals</b>	<b>246,315</b>	<b>\$ 102.42</b>	<b>\$ 25,227,609</b>

data sources

- Total hours from Tables 1,2,3,4
- FY25 CLIA State Agency final approved budgets