

**Supporting Statement, A**  
**Hospice Survey and Deficiencies Report Form and Supporting Regulations**  
**(CMS-643)**

**I. Background**

We are requesting reinstatement with change of the OMB approval for the CMS-643 form. The OMB control number for this form is 0938-0379.

A hospice is a health care entity that provides palliative care (relief of pain and uncomfortable symptoms), as opposed to curative care, to terminally ill individuals. In addition to meeting the patient's medical needs, hospice care addresses the physical, psychosocial, and spiritual needs of the patient, as well as psychosocial needs of the patient's family/caregiver related to the terminal illness. The emphasis of the hospice program is on keeping the hospice patient at home with family and friends as long as possible.

The CMS-643 form titled "Hospice Survey and Deficiencies Report" is primarily a coding worksheet designed to facilitate data collection during a hospice survey for Medicare participation. The CMS-643 form is used to collect several data elements related to patient health and safety, record reviews and data about the specific hospice's operations, staffing and demographics. CMS has made several revisions to this form based on duplication of collected information from the CMS-643 and the CMS-417 form titled "Hospice Request for Certification in the Medicare Program" (OMB Control number: 0938-0313).

The data collected on the CMS-643 form is entered into the Internet Quality Improvement and Evaluation System (iQIES) surveyor database. Hospice surveyors that have access to the electronic iQIES system while onsite at a hospice, can enter the CMS-643 form data directly into the system. If this access is not available to the surveyor, they can record their finding directly onto the CMS-643 form and input the data into the system at a later time. We removed the requirement for the surveyors to sign the CMS-643 to certify their findings as this process has been automated once information is entered into the iQIES database.

**II. Justification**

**1. Legal Need and Basis.**

Section 1864 of the Social Security Act (the Act) requires the Secretary to enter into agreements with the States to survey providers and certify compliance or noncompliance with the Medicare conditions of participation. Section 1902(a)(33)(B) of the Act requires the State Medicaid Agency to contract with the State Survey Agency used by Medicare to determine whether providers meet the requirements for participation in the Medicaid program. 42 CFR 488.26(c) and 42 CFR 442.30(a)(4) require that State Survey Agencies must use the survey forms, methods and procedures prescribed by CMS. CMS also recognizes that hospice Accrediting Organizations use the CMS-643 form for survey activities.

**2. Information Uses**

The data collected on the CMS-643 form is used by the SAs, AOs, and CMS Locations

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(formerly called CMS Regional Offices or “ROs”) as the basis for certification decisions for hospices that wish to obtain or retain participation in the Medicare and Medicaid programs. This information collected provides needed information for certification processing, including the verification of providers demographics and services provided during the recertification cycle. The information is used by the CMS Locations, which have the delegated authority to certify Medicare facilities for participation, and by State Medicaid agencies, which have comparable authority under Medicaid. The information on the Hospice Survey and Deficiencies Report Form is coded for entry into the national database system. These data are analyzed for program evaluation and monitoring purposes. This information is also available to the public upon request.

3. Improved Information Technology

The coded information on the CMS-643 form provides essential data about a hospice’s organizational structure as well as records information reviewed by surveyors to determine compliance with the Medicare requirements. The CMS-643 is provided in a fillable form, however in most survey circumstances, the information collected is directly entered into the surveyor database (i.e. the Internet Quality Improvement and Evaluation System (iQIES)).

4. Duplication of Similar Information

The CMS-643 form is to be used in all hospice surveys and has been revised to ensure no duplication with any other collection instruments. This form is the only standardized mechanism available for hospice surveyors to record data on hospice compliance with the Federal regulatory requirements. CMS also removed a large section of the form which was originally intended to annotate the deficiencies. This was duplicative as both State Survey Agencies (SAs) and Accrediting Organizations (AOs) record deficiencies on the CMS-2567 (OMB Control Number: 0938-0391).

5. Small Business

These requirements do not affect small businesses.

6. Less Frequent Collection

Hospice surveys are required every 3 years. Therefore, the CMS-643 form is used for each hospice only once every 3 years.

7. Special Circumstances for Information Collection

There are no special circumstances for this information collection. These requirements comply with all general information collection guidelines in 5 CFR 1320.6.

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8. Federal Register and Outside Consultations

The 60-day Federal Register notice published on XXXX .

The 30-day Federal Register notice published on XXXX.

9. Payment or Gifts

There are no payments or gifts associated with this collection.

10. Confidentiality

We do not pledge confidentiality. Because hospice surveys are performed by the SAs, they may be made public and are subject to Freedom of Information Act requests.

11. Sensitive Questions

There are no questions of a sensitive nature associated with this form.

12. Estimate of Burden

There are currently 7,029 Medicare certified hospices nationally\*. Hospices are surveyed at least every 36 months by the SA or AO (for deemed hospices) consistent with the Improving Medicare Post-Acute Care Transformation Act of 2014 (“IMPACT Act of 2014”). This equates to **2,343** hospices being surveyed by the SAs each year.

\*Hospice QCOR data file [https://qcor.cms.gov/hosp\\_surveys/Hospice\\_Survey\\_Reports](https://qcor.cms.gov/hosp_surveys/Hospice_Survey_Reports)

- 7,029 hospices in US divided by 3 = 2,343

The CMS-643 form is completed by the hospice surveyor team during the course of the survey (refer to Section 14). Hospices will provide various documentation (facility records, demographic information, services provided) to the surveyors as required as part of the standard survey processes outlined in the State Operations Manual [Appendix M](#).

We estimate that the total *annual* time burden *across all* hospices surveyed *per year* would be **1,172 hours** to provide documentation to the surveyors.

- 0.5 hours per survey x 2,343 hospices surveyed per year = 1,172 hours

Staff of the hospice providing surveyor documentation is generally completed by the hospice's Administrative Assistant. According to the U.S. Bureau of Labor Statistics, the mean hourly

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wage for a Medical Secretary or Administrative Assistant is \$20.85<sup>1</sup>. This wage, adjusted for the employers overhead and fringe benefits, would be **\$41.70**.

We further estimate that the total *annual* cost burden *across all hospices* surveyed *per year* **\$48,872.40**.

- 1,172 annual hours x \$41.70 per hour = \$ 48,872.40

13. Capital Costs

There are no capital costs.

14. Cost to Federal Government

CMS has integrated CMS-643 into the surveyor database and made the form fillable. Therefore, there are no federal government costs associated with printing or manual completion. CMS allocates funding to each state for the reasonable costs of surveying to certify compliance or non-compliance of providers and suppliers as specified in the 1864 Agreement and for Medicare's fair share of costs related to Medicare facilities. The Secretary agrees to provide funds for the reasonable and necessary costs to the States to perform the functions authorized by the agreements. This amount is appropriated by Congress each year and is intended to cover the costs associated with surveying providers, including completing the CMS-643 form, therefore there are no additional costs for the federal government.

For deemed hospices, the AOs charge a fee for accreditation and survey activities, therefore there is no allocation by the federal government for deemed hospices.

15. Program/Burden Changes

The table below shows the change in burden associated with the CMS-643 form:

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<sup>2</sup> <https://www.bls.gov/oes/current/oes291141.htm>

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<sup>1</sup> <https://www.bls.gov/oes/2023/may/oes436013.htm#nat>

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Task	Total Requested	Due to Adjustment in OPDIV/Office Estimate	Currently Approved
a. Number of hospices surveys performed annually	2,343 surveys	+ 292 Responses	2,051
b. Time burden <b>per each</b> hospice	0.5 hours	-23.5 hours	24 hours
c. <b>Annual</b> time burden <b>across all</b> hospices surveyed	1,172 hours	-48,052 hours	49,224 hours
d. Cost burden <b>per each</b> hospice	\$ 41.70	-\$ 1,867.30	\$1,909
e. <b>Annual</b> cost burden <b>across all</b> hospices surveyed	\$ 48,872.40	-\$3,867,388.60	\$3,916,261
<b>Total Annual Responses</b>	<b>2,343 responses</b>	<b>+292</b>	<b>2,051</b>
<b>Total Hour Burden</b>	<b>1,172 hours</b>	<b>-48,052 hours</b>	<b>49,224 hours</b>
<b>Total Cost Burden</b>	<b>\$ 48,872.40</b>	<b>-\$3,867,388.60</b>	<b>\$3,916,261</b>

As the above table shows, the number of annual surveys has increased from 2,051 to 2,343 which is 292 based on hospice growth. The burden hours decreased significantly from 49,224 hours to 1,172 hours. The annual burden has been recalculated to reflect 30 minutes for completion of the hospice to gather the information for the surveyors to complete the CMS-643 form. We note the significant decrease in the burden hours, and cost is due to our reevaluation of the form and the survey entities which incur the burden. We have also revised the form to reduce duplication of information collected and also adjusted the burden calculations to reflect the time that the hospice will take to gather documentation to support the surveyor in completing this form as part of the standard survey process (refer to Section 14).

In the prior cost analysis, calculated the burden hours and cost of surveyors collecting and reporting this information. CMS allocates funding to each state for the reasonable costs of

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surveying to certify compliance or non-compliance of providers and suppliers as specified in the 1864 Agreement, therefore calculation of surveyor costs was unnecessary in the prior form package. Completing the CMS-643 form imposes minimal cost burden to hospice providers as the documentation provided to the State Survey Agencies and Accrediting Organizations (AOs) for deemed hospices surveyors is part of documentation the hospice needs to provide to demonstrate compliance to participate in the Medicare program.

16. Publication and Tabulation Dates

There are no publication and tabulation dates with this collection.

17. OMB Expiration Date

CMS will display the expiration date on the collection instrument.

18. Certification Statement

There is no exception to the certification statement.