



Center for Clinical Standards and Quality/Survey & Certification Group

Admin Info: 15-19-ALL

DATE: February 27, 2015

TO: State Survey Agency Directors

FROM: Director
Survey and Certification Group

SUBJECT: FY2015 State Performance Standards System (SPSS) Guidance

Memorandum Summary

- **SPSS Framework:** The three Dimensions of Frequency, Quality, and Enforcement continue to serve as our organizing framework for the SPSS by which we can organize and measure the value associated with the survey process overall.

Attached are the following documents that comprise the final FY2015 SPSS Guidance:

- Attachment 1 – FY 2015 SPSS Guidance Admin Info
- Attachment 2 – FY 2015 SPSS Guidance
- Attachment 3 – SPSS Dimensions Overview for FY 2015
- Attachment 4 – FY 2015 Frequency Measures-Discussion of Data
- Attachment 5 – Q1 Worksheet
- Attachment 6 – Q1 Random Sample Procedure document
- Attachment 7 – Q7 ACTS Report procedures for FY 2015
- Attachment 8 – Q8 Worksheet
- Attachment 9 – Q9 Worksheet
- Attachment 10 – E2 Procedures document
- Attachment 11 – E3 Report Procedure document
- Attachment 12 – Summary Score Sheet
- Attachment 13 – Rounding Issues
- Attachment 14 – Acronyms

The three-dimensional structure in the FY 2015 Guidance (frequency, quality and enforcement) provides a framework by which we can organize and measure the value associated with the survey process overall. In addition, these three dimensions structure our efforts to standardize, promote consistency and automate (as much as possible) the data that are used in the State performance evaluation process.

The following revisions have been made to the FY 2015 SPSS:

- E3, Processing of termination cases for Non-Nursing Home providers' Data Sources and method of evaluation was modified.
- E4, Special Focus Facilities measure was reverted to FY2012 threshold.
- F5, Timeliness of upload into CASPER of Complaint Surveys measure was removed.
- F3, Hospices tier and threshold was modified.
- Incorporated numerous wording changes and or clarifications based upon received comments

We appreciate your efforts to continuously improve the Medicare survey and certification program, in light of all resource and budget challenges that we have encountered in recent years and staffing challenges that States are facing now.

Point of Contact: Please contact one of the members of the State Performance Standards team if there are questions or concerns:

Francis Adanuty at Francis.Adanuty@cms.hhs.gov or call (410) 786-9867

Akosua Ghailan at Akosua.Ghailan2@cms.hhs.gov or call (410) 786-8047

Tom Kress at Thomas.Kress3@cms.hhs.gov or call (410) 786-3362

Effective Date: This memo and associated attachments is in effect for FY 2015. Please ensure that all appropriate staff is fully informed within 30 days of the date of this memorandum.

/s/

Thomas E. Hamilton

Attachment(s)

Attachment 1 – FY 2015 SPSS Guidance Admin Info

Attachment 2 – FY 2015 SPSS Guidance

Attachment 3 – SPSS Dimensions Overview for FY 2015

Attachment 4 – FY 2015 Frequency Measures-Discussion of Data

Attachment 5 – Q1 Worksheet

Attachment 6 – Q1 Random Sample Procedure document

Attachment 7 – Q7 ACTS Report procedures for FY 2015

Attachment 8 – Q8 Worksheet

Attachment 9 – Q9 Worksheet

Attachment 10 – E2 Procedures document

Attachment 11 – E3 Report Procedure document

Attachment 12 – Summary Score Sheet

Attachment 13 – Rounding Issues

Attachment 14 – Acronyms

cc: Survey and Certification Regional Office Management