

CMS-855A Application Revisions

<u>Section Number</u>	<u>Revision</u>
4(A)	Included checkbox for a hospice to indicate whether it actually treats patients at the listed practice location.
5 (Instructions)	Included the following checkbox: "Check here if you are a Skilled Nursing Facility and skip this section. All organizational ownership interest and managing control information must be reported in Attachment 1."
6 (Instructions)	Included the following checkbox: "Check here if you are a Skilled Nursing Facility and skip this section. All individual ownership interest and managing control information must be reported in Attachment 1."
6(A)	Included checkbox for a hospice to indicate whether the listed individual is the hospice's administrator or medical director.
Page 51 - Paperwork Reduction Act (PRA) Statement	Revised the PRA Statement.
Attachment 1 (Organizations) - Instructions	Explains what information must be reported and defines various terms, such as additional disclosable party (ADP).
Attachment 1 (Organizations) - Section A (Organization Identification Information)	Included the following checkbox: "Check this box if you have no organizations with ownership or managing control to report."
Attachment 1 (Organizations) - Section A	Included the checkboxes "Change", "Add", and "Remove" and a space for the SNF to report the effective date of the change.
Attachment 1 (Organizations) - Section A	Included the following data elements about the organization disclosed in Section A: (1) legal business name; (2) doing business as (DBA) name; (3) address; (4) telephone number; (5) fax number (if applicable); (6) e-mail address (if applicable); (7) National Provider Identifier (NPI); (8) tax identification number (TIN); and (9) Medicare identification number
Attachment 1 (Organizations) - Instructions to Section B (Type of Organization)	Included definitions of private equity company (PEC), real estate investment trust (REIT), and holding company (HC)

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Organizations) - Section B	Included checkboxes for SNFs to indicate whether the disclosed organization is proprietary, non-profit, or a disregarded entity.
Attachment 1 (Organizations) - Section B	Included checkboxes for SNFs to identify the disclosed organization's business structure (e.g., corporation, state government-owned entity).
Attachment 1 (Organizations) - Section B	Included "Yes/No" checkboxes for SNFs to identify whether the disclosed organization is or is not of a certain type (e.g., PEC, bank/financial institution, etc.)
Attachment 1 (Organizations) - Section B	Included the question: "Was this organization solely created to acquire or buy the provider or the provider's assets?"
Attachment 1 (Organizations) - Section B	Included the question: "Is this organization the ultimate parent company in a multi-organizational group of entities?"
Attachment 1 (Organizations) - Section B	Included the question: "Is this organization itself owned by any other organization or individual?"
Attachment 1 (Organizations) - Section C (Chain Home Offices (CHO) Only)	Included the checkboxes "Change", "Add", and "Remove" and a space for the SNF to report the effective date of the change.
Attachment 1 (Organizations) - Section C	Included checkboxes via which the SNF can indicate the type of action it is reporting.
Attachment 1 (Organizations) - Section C	Included identifying data elements for the CHO administrator or CEO (e.g., name, DOB)
Attachment 1 (Organizations) - Section C	Included checkboxes via which the SNF can identify its affiliation with the CHO (e.g., joint venture/partnership, leased)

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Organizations) - Section D(1) (Relationship to SNF and/or Additional Disclosable Party (ADP) of SNF)	Included the following question for SNFs that are corporations: "Does the reported organization have a 5% or greater direct ownership interest in the SNF?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Organizations) - Section D(2)	Included the following question for SNFs that are LLCs: "Does the reported organization have any direct ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Organizations) - Section D(3)	Included the following question for SNFs that are general partnerships (GPs): "Does the reported organization have any general partnership/ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Organizations) - Section D(4)	Included the following question for SNFs that are limited partnerships (LPs): "Does the reported organization have any general or limited partnership/ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Organizations) - Section D(5)	Included the following question for SNFs that are not corporations, LLCs, GPs, or LPs: "Does the reported organization have a 5% or greater direct ownership interest in the SNF?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Organizations) - Section D(6)	Included the following question for SNFs that are not LLCs, GPs, and LPs: "Does the reported organization have a 5% or greater indirect ownership interest in the SNF?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Organizations) - Section D(7)	Include the following question for SNFs that are LLCs, GPs, or LPs: "Does the reported organization have any indirect ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of ownership.

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Organizations) - Section D(8)	Included the question: "Does the reported organization have a 5% or greater mortgage or security interest in the SNF?" If yes, the SNF must disclose the effective date, type of interest, and exact percentage of the interest.
Attachment 1 (Organizations) - Section D(9)	Included the question: "Is the reported organization a trustee of the SNF?" If yes, the SNF must disclose the effective date.
Attachment 1 (Organizations) - Section D(10)	Included the question: "Does the reported organization exercise any of the following types of control, either directly or indirectly, over the SNF or any part of the SNF?" If yes, the SNF must identify: (1) the type(s) of control by answering "Yes/No" to "Operational", "Managerial", and "Financial" (and report the effective date for any "Yes" answer); (2) further explain the type/form of control (e.g., form of financial control); (3) the part(s) of the SNF said control involves; and (4) whether the control is furnished under contract.
Attachment 1 (Organizations) - Section D(11)	Included the question: "Does the reported organization provide any of the following—either directly or indirectly— to the SNF or any part of the SNF?" If yes, the SNF must: (1) respond "Yes/No" to each of the listed policies/procedures and services (and report the effective date for any "Yes" answer); (2) identify the type(s) of services (e.g., accounting); and (3) explain whether these services are furnished under contract.
Attachment 1 (Organizations) - Section D(12)	Included the question: "Does the reported organization lease or sublease real property to the SNF?" If yes, the SNF must explain the lease arrangement and the length of the lease.
Attachment 1 (Organizations) - Section D(13)	Included the question: "Does the reported organization directly or indirectly own at least 5 percent of the total value of the SNF's real property or the real property on/in which the SNF operates?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) exact percentage of ownership; and (3) whether the ownership is of real property the SNF owns or of real property the SNF leases or subleases.
Attachment 1 (Organizations) - Section D(14)	Included the following question: "Is the reported organization a 5% or greater direct or indirect owner of any ADP of the SNF that is a corporation? If yes, the SNF must disclose: (1) the effective date of ownership; (2) the type of ownership; (3) the exact percentage of ownership; and (4) the ADP of which the organization is an owner.

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Organizations) - Section D(15)	Included the following question: "Does the reported organization have any direct or indirect ownership interest in -- or exercises managing control of --- any ADP of the SNF that is an LLC regardless of the percentage?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) the type of ownership; (3) the exact percentage of ownership; and (4) the ADP of which the organization is an owner.
Attachment 1 (Organizations) - Section D(16)	Included the following question: "Does the reported organization have any general partnership/ownership interest in any ADP of the SNF that is a general partnership regardless of the percentage?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) the exact percentage of ownership; and (3) the ADP of which the organization is a general partner.
Attachment 1 (Organizations) - Section D(17)	Included the following question: "Does the reported organization have any general partnership interest (regardless of the percentage) in any limited partnership ADP of the SNF or at least a 10 percent limited partnership interest in any ADP of the SNF?" If yes, the SNF must disclose the effective date of ownership; (2) the type of partnership interest; (3) the exact percentage of ownership; and (4) the ADP of which the organization is a general or limited partner.
Attachment 1 (Organizations) - Section D(18)	Included the following question: "Is the reported organization a trustee of the ADP?" If yes, the SNF must disclose the effective date of the trustee interest and the ADP of which the organization is a trustee.
Attachment 1 (Organizations) - Section D(19)	Included the following question: "Does this ADP owner/trustee/LLC manager (as indicated in Question 14, 15, 16, 17, or 18) have any interest in the SNF itself OR in another ADP of the SNF?" If yes, the SNF must list that entity's LBN.

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Organizations) - Section E (Final Adverse Legal Action (FALA))	Included the checkbox "Change" and a space for the SNF to indicate the effective date of the change.
Attachment 1 (Organizations) - Section E	Included the following question: "Has the organization in section A, under any current or former name or business identity, ever had a final adverse action listed in section 3 of this application imposed against it?" If yes, the SNF must report each FALA, when it occurred, and the federal or state agency or the court or administrative body that imposed the action.
Attachment 1 (Individuals) - Instructions	Explaining what information must be reported and defining various terms, such as additional disclosable party.
Attachment 1 (Individuals) - Section A (Individual Identification Information)	Included the following checkbox: "Check this box if you have no individuals with ownership or managing control to report."
Attachment 1 (Organizations) - Section A	Included the checkboxes "Change", "Add", and "Remove" and a space for the SNF to report the effective date of the change.
Attachment 1 (Individuals) - Section A	Included the following data elements concerning the individual reported in Section A: (1) name; (2) title; (3) SSN; (4) date of birth; (5) telephone number; (6) fax number (if applicable); and (7) e-mail address (if applicable).
Attachment 1 (Individuals) - Section B(1) (Relationship to SNF and/or ADP of SNF)	Included the following question if the SNF is a corporation: "Does the reported individual have a 5% or greater direct ownership interest in the SNF?" If yes, the SNF must disclose the effective date and exact percentage of ownership.

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Individuals) - Section B(2)	Included the following question if the SNF is an LLC: "Does the reported individual have any direct ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Individuals) - Section B(3)	Included the following question if the SNF is a general partnership: "Does the reported individual have any direct general partnership/ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of the ownership/partnership interest in the SNF.
Attachment 1 (Individuals) - Section B(4)	Included the following question if the SNF is a limited partnership: "Does the reported individual have any direct general or limited partnership/ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of the ownership/partnership interest in the SNF.
Attachment 1 (Individuals) - Section B(5)	Included the following question if the SNF is of a business type other than those referenced in the immediately preceding Sections 1-4: "Does the reported individual have a 5% or greater direct ownership interest in the SNF?" If yes, the SNF must disclose the effective date and exact percentage of the ownership interest in the SNF.
Attachment 1 (Individuals) - Section B(6)	Included the following question for SNFs that are not LLCs, GPs, and LPs: "Does the individual have a 5% or greater indirect ownership interest in the SNF?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Individuals) - Section B(7)	Included the following question for SNFs that are LLCs, GPs, or LPs: "Does the reported individual have any indirect ownership interest in the SNF regardless of the percentage?" If yes, the SNF must disclose the effective date and exact percentage of ownership.
Attachment 1 (Individuals) - Section B(8)	Include the following question if the SNF is a corporation: "Is the reported individual an officer or director of the SNF?" If yes, the SNF must disclose the effective date, the type of position, and the person's title.

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Individuals) - Section B(9)	Included the following question if the SNF is not a corporation: "Is the reported individual a member of the SNF's governing body?" If yes, the SNF must disclose the effective date, the type of governing body, and the person's title.
Attachment 1 (Individuals) - Section B(10)	Included the following question: "Does the reported individual have a 5% or greater mortgage or security interest in the SNF?" If yes, the SNF must disclose the effective date, the type of interest, and the exact percentage of the interest.
Attachment 1 (Individuals) - Section B(11)	Included the following question: "Is the reported individual a trustee of the SNF?" If yes, the SNF must disclose the effective date.
Attachment 1 (Individuals) - Section B(12)	Included the following question: "Does the reported individual exercise any of the following types of control, either directly or indirectly, over the SNF or any part of the SNF?" If yes, the SNF must: (1) identify the type(s) of control by answering "Yes/No" to "Operational", "Managerial", and "Financial" (and listing the effective date for any "Yes" answer); (2) further explain the type/form of control (e.g., form of financial control); (3) identify the part(s) of the SNF said control involves; (4) identify whether this control is furnished as a W-2 employee, under contract, or under another arrangement; and (5) identify any organization listed in Attachment 1 of which the individual is a W-2 or contracted employee.
Attachment 1 (Individuals) - Section B(13)	Included the following "Yes/No" question: "Does the reported individual provide any of the following—either directly or indirectly— to the SNF or any part of the SNF?" If yes, the SNF must: (1) check "Yes/No" to a listing of policies/procedures and services (and list the effective date for any "Yes" answer); (2) identify the type(s) of services (e.g., accounting); (3) identify the part(s) of the SNF said control involves; (4) identify whether the control is furnished as a W-2 employee, under contract, or under another arrangement; and (5) identify any organization listed in Attachment 1 of which the individual is a W-2 or contracted employee.
Attachment 1 (Individuals) - Section B(14)	Included the following question: "Does the reported individual lease or sublease real property to the SNF?" If yes, the SNF must explain the type of lease arrangement and the length of the lease.

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Individuals) - Section B(15)	Included the following question: "Does the reported individual directly or indirectly own at least 5 percent of the total value of the SNF's real property or the real property on/in which the SNF operates?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) exact percentage of ownership; and (3) whether the ownership is of real property the SNF owns or of real property the SNF leases or subleases.
Attachment 1 (Individuals) - Section B(16)	Included checkbox for the SNF to indicate whether the listed individual is the SNF's administrator or medical director.
Attachment 1 (Individuals) - Section B(17)	Included the following question: "Does the reported individual have a 5 percent or greater direct or indirect ownership interest in any ADP of the SNF that is a corporation?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) the type of ownership; (3) the exact percentage of ownership; and (4) the ADP of which the organization is an owner.
Attachment 1 (Individuals) - Section B(18)	Included the following question: "Does the reported individual have any direct or indirect ownership interest in any ADP of the SNF that is an LLC, regardless of the percentage?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) the type of ownership; (3) the exact percentage of ownership; and (4) the ADP of which the organization is an owner.
Attachment 1 (Individuals) - Section B(19)	Included the following question: "Does the reported individual have any general partnership/ownership interest in any ADP of the SNF regardless of the percentage?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) the exact percentage of ownership; and (3) the ADP of which the individual is a general partner.
Attachment 1 (Individuals) - Section B(20)	Included the following question: "Does the reported individual have any general partnership interest (regardless of the percentage) in any limited partnership ADP of the SNF or at least a 10 percent limited partnership interest in any ADP of the SNF?" If yes, the SNF must disclose: (1) the effective date of ownership; (2) the type of partnership interest; (3) the exact percentage of ownership; and (4) the ADP of which the individual is a general or limited partner.
Attachment 1 (Individuals) - Section B(21)	Included the following question: "Is the reported individual a trustee of any ADP of the SNF?" If yes, the SNF must disclose the effective date of the trustee interest and the ADP of which the individual is a trustee.

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<u>Section Number</u>	<u>Revision</u>
Attachment 1 (Individuals) - Section B(22)	Included the following question: "Is the reported individual a corporate officer, corporate director, or LLC manager of any ADP of the SNF?" If yes, the SNF must disclose the effective date, type of position, title, and the ADP of which the individual is a corporate officer, corporate director, or LLC manager.
Attachment 1 (Individuals) - Section D(23)	Included the following question: "Does this ADP owner/trustee/LLC manager/officer/director (as indicated in Question 17, 18, 19, 20, 21, or 22) have any interest in the SNF itself OR in another ADP of the SNF?" If yes, the SNF must list that entity's LBN.
Attachment 1 (Individuals) - Section C (FALA)	Included the checkbox "Change" and a space for the SNF to indicate the effective date of the change.
Attachment 1 (Individuals) - Section C	Included the following question: "Has the organization in section A, under any current or former name or business identity, ever had a final adverse action listed in section 3 of this application imposed against it?" If yes, the SNF must report each FALA, when it occurred, and the federal or state agency or the court or administrative body that imposed the action.

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<u>Justification</u>
To ascertain whether the practice location is merely an administrative address
To alert the MAC that the skilled nursing facility (SNF) is completing Attachment 1 instead of Section 5.
To alert the MAC that the skilled nursing facility (SNF) is completing Attachment 1 instead of Section 6.
Per 42 CFR 424.502, hospice administrators and hospice medical directors are considered managing employees and must be reported.
To furnish more detail regarding the CMS-855A's data collection requirements as they pertain to the PRA.
To assist the SNF in completing Attachment 1.
To indicate why no organizations are listed in Attachment 1.
To indicate that the SNF is submitting a change in its current Attachment 1 enrollment information.
To properly identify the listed entity.
To assist SNFs in understanding what PECs, REITs, and HCs are for reporting purposes.

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<u>Justification</u>
To identify the listed entity's IRS business designation.
To identify the listed entity's business structure.
To identify the type of listed entity.
To further identify the type of listed entity.
To help identify the SNF's parent company and/or the organization's role within a larger organization structure.
To help identify the organization's role within a larger organization structure.
To indicate that the SNF is submitting a change in its current Attachment 1 CHO information.
To clarify the reason for the CHO data reported in Section C.
To identify the administrator/CEO
To clarify the SNF-CHO relationship.

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<u>Justification</u>
To identify and explain the corporation's/organization's ownership of the SNF, if applicable.
To identify and explain the LLC's/organization's ownership of the SNF, if applicable.
To identify and explain the general partnership's/organization's ownership of the SNF, if applicable.
To identify and explain the limited partnership's/organization's ownership of the SNF, if applicable.
To identify and explain the organization's ownership of the SNF, if applicable.
To identify and explain the organization's ownership of the SNF, if applicable.
To identify and explain the organization's ownership of the SNF, if applicable.

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<u>Justification</u>
To identify and explain the organization's mortgage/security interest in the SNF, if applicable.
To identify and explain the organization's trustee interest the SNF, if applicable.
To identify and explain the types of control the organization has over the SNF.
To identify and explain the services the organization furnishes for/to the SNF.
To identify and explain the lease arrangement, if applicable.
To identify and explain the property ownership.
To identify and explain the corporation's/organization's ownership of an ADP of the SNF, if applicable.

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<u>Justification</u>
To identify and explain the LLC's/organization's ownership of an ADP of the SNF, if applicable.
To identify and explain the general partnership's/organization's ownership of an ADP of the SNF, if applicable.
To identify and explain the limited partnership's/organization's ownership of an ADP of the SNF, if applicable.
To identify and explain the trustee interest.
To help identify any ADP ownership/managerial relationships in the SNF and between ADPs.

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<u>Justification</u>
To indicate that the SNF is submitting a change in its current Attachment 1 FALA information.
To indicate whether the organization has any adverse legal history and, if so, background information regarding the FALA.
To assist the SNF in completing Attachment 1.
To indicate why no individuals are listed in Attachment 1.
To indicate that the SNF is submitting a change in its current Attachment 1 enrollment information.
To properly identify the listed individual.
To identify and explain the individual's ownership of the SNF, if applicable.

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<u>Justification</u>
To identify and explain the individual's ownership of the SNF, if applicable.
To identify and explain the individual's ownership of the SNF, if applicable.
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To identify and explain the individual's ownership of the SNF, if applicable.
To identify and explain the individual's ownership of the SNF, if applicable.
To identify and explain the individual's ownership of the SNF, if applicable.
To identify and explain the individual's officer/director position with the SNF, if applicable.

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<u>Justification</u>
To identify and explain the individual's position with the SNF's governing body, if applicable.
To identify and explain the individual's mortgage/security interest the SNF, if applicable.
To identify and explain the individual's trustee interest in the SNF, if applicable.
To identify and explain the types of control the individual has over the SNF.
To identify and explain the services the individual furnishes for/to the SNF.
To identify and explain the lease arrangement, if applicable.

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<u>Justification</u>
To identify and explain the property ownership.
Per 42 CFR 424.502, SNF administrators and hospice medical directors are considered managing employees and must be reported.
To identify and explain the individual's ownership of an ADP, if applicable.
To identify and explain the individual's ownership of an ADP, if applicable.
To identify and explain the individual's ownership/partnership interest in an ADP, if applicable.
To identify and explain the individual's ownership/partnership interest in an ADP, if applicable.
To identify and explain the trustee interest.

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<u>Justification</u>
To identify and explain the person's position as officer/director/manager.
To help identify any ADP ownership/managerial relationships with the SNF and C38between ADPs.
To indicate that the SNF is submitting a change in its current Attachment 1 FALA information.
To indicate whether the individual has any adverse legal history and, if so, background information regarding the FALA.