

DEC - 8 2017

Administrator
Washington, DC 20201

The Honorable Charles E. Grassley Chairman Committee on the Judiciary United States Senate Washington, DC 20510

Dear Mr. Chairman:

I am writing in response to your letter regarding communications between the Centers for Medicare & Medicaid Services (CMS) and accrediting organizations (AOs). Specifically, you expressed concerns about the lack of AO access to the CMS surveyor data bases, Automated Survey Processing Environment (ASPEN) and ASPEN Complaints/Incidents Tracking System (ACTS).

AOs currently do not have access to ASPEN or ACTS, nor do we support providing access to these systems. These systems were designed for survey activity data input. The bulk of the data contained in these databases is related to facilities which participate in Medicare or Medicaid via state surveys rather than by accreditation. There is not a way to limit AO access to their customer data, nor a way to alert the AO to new data added to their customer files. We are in the early stages of designing a replacement system for ASPEN and ACTS and will consider the data needs of AOs as we progress through the design phase. We expect that it will be at least two years before implementation.

There are electronic mechanisms in place to facilitate two way communication between CMS and the AOs regarding Immediate Jeopardy (IJ) situations and substantial areas of non-compliance (condition level deficiencies) related to complaints. When such deficiencies are identified, the AO is promptly notified via official communication and receives a copy of the complaint survey report as well as the facility complaint notification letter outlining adverse actions CMS is taking. The CMS central office also forwards IJ alert memos received from a Regional Office to the appropriate AO as a backup communication.

In addition to these electronic communications, a CMS database is publicly available, Quality, Certification and Oversight Reports (QCOR). The AOs are familiar with this website. The website can be accessed at the following link: <a href="https://pdq.aplusgov.net/main.jsp">https://pdq.aplusgov.net/main.jsp</a>. The database provides reports and information on all CMS-certified, deemed and non-deemed, facilities. Examples of the facility survey information available include, but are not limited to the following: survey history, AO, survey type, deficiencies cited for any given SA survey, facility specific as well as summary data by state and nation. These reports are generated from the data

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that is entered into the ASPEN and ACTS database systems. The reports generated from QCOR do not provide the level of detail found on the 2567 reports themselves or the data that is in ASPEN or ACTS, but it does provide the Deficiency Statements. The Regional Offices forward to the AOs and the facility, the actual 2567 reports generated from any survey that is conducted on a facility.

We do not believe access to ASPEN or ACTS would provide substantive benefit to the AOs or assist them to be more effective in their investigative or enforcement actions. The CMS Regional Offices and central office freely share accredited facility data with AOs. We are confident that the information systems and methods of communication currently in use provide sufficient opportunities for the AO and CMS to conduct comprehensive surveys for those facilities participating in Medicare. The replacement database will be developed and implemented incorporating the AO data needs to ensure a robust and efficient system.

Thank you again for your letter, and bringing this important issue to my attention. I appreciate your leadership on CMS's programs.

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Seema Verma