CMS 671 and CMS 672 FORMS



September 21, 2012 Bernadette Harville RN, BSN, MPA, Training Coordinator Bureau of Health Provider Standards

671 and 672

During each recertification survey, the surveyors are required to have the facility complete:

- CMS-671, Long Term Care Facility Application For Medicare and Medicaid and
- CMS-672, Resident Census and Conditions of Residents
- During complaint surveys, surveyors are often required to have the facility complete CMS-672, Resident Census and Conditions of Residents

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672

The CMS 672, Resident Census and Conditions of Residents, reports:

- The total census at the time of survey
- Current condition of residents at the time of survey

F672

- "Facility" defined as any bed that is Medicare and/or Medicaid certified
- "Residents" defined as residents in certified beds at the time of survey
- Total residents = all residents in Medicare and Medicaid certified *beds + the number of residents with a bed hold*

Form 672 Resident Census and Condition

- Should be provided to the survey team within 24 hours of the Entrance Conference
- Completed and signed in ink

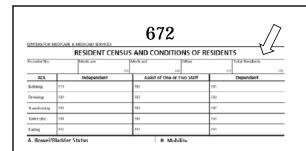
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Common Errors 672

- Form not signed and/or dated
- Facilities use automated MDS data to complete the form without verifying that the information represents current residents status (at the time of the survey).
- Facilities do not cross check the 672 with the Resident Roster Matrix (CMS-802) and the information does not match.

Common Errors 672

- The numbers in F75 (Medicare residents) plus F76 (Medicaid residents) plus F77 (other i.e. private pay) do not equal the number in F78 (Total residents).
- F75, F76, F77 and F78 should include residents temporarily away from the facility or on bed hold.



The numbers listed in: F79 to F81, F82-F84, F85-F87, F88-F90 and F91-F93 should **equal** the number listed in F78 (Total Residents).

CMS 671, Long Term Care Facility Application for Medicare and Medicaid

Completed by every facility that participates in the Medicare and Medicaid programs at the time of every standard/annual survey

Consists of two pages:

- First page collects facility specific information related to type of services provided and facility characteristics
- The second page contains staffing information

671

 Should be provided to the survey team within 24 hours of the Entrance Conference



DEPARTMENT OF HEALTH AND I CENTERS FOR MEDICARE & MEI			671	
LONG TERM CARE	FACILITY APP	LICATION FOR	MEDICARE A	AND MEDICAID
Standard Survey		Extended Survey		
From: F1 D D YY M	M DD YY	From: F3 DD		1 DD YY
Name of Facility		Provider N	lumber	Fiscal Year Ending: I
Street Address	City		County	State Zip Code
Telephone Number: F6		State/County Code:	F7	State/Region Code: F8
A. 19 01 Skilled Nursing Facility (SNF) 02 Nursing Facility (NF) - Medica 03 SNF/NF - Medicare/Medicaid B. Is this facility hospital based? F10 If yes, Indicase Hospital Provider	id Participation Yes No			
Ownership: F12 □□				
	NonF	rofit	G	overnment
For Profit				
For Profit 01 Individual 02 Partnership	04 C3	ourch Related	07 State 08 County	10 City/County 11 Hospital District

Common Errors 671

- The form not signed and/or dated
- F5 (fiscal year ending date) left blank. This is the facility fiscal year ending date.
- If you mark "yes" in columns A1, A2 or A3, accurately document the number of hours (if worked during the most recent complete pay period).
- If you are completing hours worked in columns B, C, or D then, A1, A2 or A3 should have a "yes."

671 and 672

 As part of its annual survey, CMS sources data for staffing measures from the Long Term Care Facility Application for Medicare and Medicaid, the CMS-671. (To accurately calculate staff-to-resident ratios, resident data is pulled from form CMS-672, Resident Census and Conditions of Residents).

CMS 671 Application for Medicare and Medicaid

- Your facility's Five-Star rating for staffing comes directly from the information you enter on the CMS671 – Application for Medicare and Medicaid.
- Please check the forms for accuracy and completeness prior to turning in the forms.

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- ADPH will only correct data entry errors that we make. We do not correct any mistakes you make completing the form.
- Instructions are attached to both forms for guidance.
- Forms are available on online at CMS website.

671 and 672

- If you have not previously been required to complete the forms and are unclear as to what you need to place in a certain block on the form, refer to the instructions.
- If you have further questions, please feel free to ask the survey team or a supervisor.

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