

**Crosswalk for Changes to Hospice Request for Certification in the Medicare Program
(CMS-417)**

Section # on Current CMS-417 (08/10)	Type of Change	Rational for Change
IV of Instructions	Add: If a service is provided both directly and through arrangement, place a "3" in the appropriate box.	Provide clarification to existing ASPEN instructions
IV of form: Services Provided	Add: If by staff and arrangement, place a "3" In the block(s)	Provide clarification to existing ASPEN instructions

These minor updates on the form and instructions are based on the suggestions from State agency and CMS regional offices users.