

SUPPORTING STATEMENT
EXTENSION LOCATIONS OF MEDICARE APPROVED PROVIDERS OF
OUTPATIENT PHYSICAL THERAPY AND SPEECH-LANGUAGE
PATHOLOGY (OPT) SERVICES (CMS-381)

A. BACKGROUND

This is a request for reinstatement of a previously approved collection for OMB Control number 0938-0273. This form was developed to ensure that each extension location of providers of outpatient physical therapy and speech-language pathology services, at which they furnish services, is reported by the providers to the State survey agencies. When a rehabilitation agency provider furnishes services at locations other than the already Medicare-approved primary site, those locations/units will be considered to be a part of the rehabilitation agency and are subject to the same Medicare regulations as the primary site that holds the Medicare Certification number and Provider Agreement.

B. JUSTIFICATION

1. Need and Legal Basis

Collection of this information is used in conjunction with Conditions of Participation at 42 CFR 485.701 through 485.729 governing the operation of providers of outpatient physical therapy and speech-language pathology services. The provider uses the form to report to the State survey agency extension locations that it has added since the date of last report. The collection occurs annually.

2. Information Users

This form is used by the State survey agencies and by the CMS regional offices to identify extension locations where services are furnished by providers of outpatient physical therapy and speech-language pathology services. These locations must be known to surveyors in order to ensure the appropriate monitoring of providers' compliance with the Federal requirements.

3. Improved Information Technology

This form does not request anything other than identifying data and providers are free to take advantage of any technological means for completion that are available.

4. Duplication

This form does not duplicate existing data collection. No forms exist that are similar or that collect this data. This is the only mechanism to collect this data.

5. Small Business

This form will affect small business organizations, but the burden is very minimal and the data is not available from any other source.

6. Less Frequent Collection

Collection of this information coincides with the certification survey. If the information was collected less frequently than annually, it would result in surveys not being completed in projected timeframes and inefficient use of survey personnel.

7. Special Circumstances

No special circumstances exist for this information collection.

8. Federal Register and Outside Consultation

The 60-day Federal Register notice published on August 4, 2017 (82 FR 36403). There were no public comments.

The 30-day Federal Register notice published on October 11, 2017 (82 FR 47210).

9. Payments or Gifts

There are no payments/gifts to respondents.

10. Confidentiality

CMS does not assure confidentiality.

11. Sensitive Questions

There are no sensitive questions on this form.

12. Estimate of Burden (Hours and Wages)

We estimate that 2,161 respondents will complete this form annually; this is the number of providers of Outpatient Physical Therapy/Outpatient Speech Pathology (OPT) services in Calendar Year 2016. The requested information should be readily available to the OPTs. The respondent only has to complete 3/4 of a 1-page form and it should not take any longer than 15 minutes (0.25 hour) to complete.

Estimate of Burden:

15 minutes (0.25 hour) per report
1 report per respondent filed annually
2,161 respondents
540 hours of annual burden

It is estimated that this information collection requirements will cost the provider community \$49,248 annually, since we anticipate this form to be completed by the equivalent of an Administrative Services Manager (BLS 11-3011), (<https://www.bls.gov/oes/current/oes113011.htm>), with a mean hourly wage \$45.60 based on the May, 2015 Bureau of Labor Statistics (BLS) National Occupational Employment and Wage Estimates. We therefore estimate the hourly burden to be \$91.20 per hour, taking the above-referenced mean hourly wage of \$45.60 and then doubling it, to account for benefits and other overhead. In CY 2016, there were 2,161 Medicare certified Outpatient Physical Therapy and/or Speech-Language Pathology providers.

540 hours X \$91.20 / hour = \$49,248

13. Capital Costs

There are no capital costs.

14. Federal Cost Estimates

The only cost to the Federal government is for printing the form. Printing costs for 2161, 1-page forms, is estimated at \$238 (standard government calculation rate per printed page is \$0.11).

15. Burden Changes/Program Changes

We have revised the hourly burden from 565 hours to 540 hours. This change reflects a decrease in the number of Medicare certified OPT providers from 2960 to 2161.

We have also revised the financial burden to more accurately reflect true costs. The previous cost burden was based on a \$43.36 hourly wage. We are revising this number to make it current with expected labor costs. We have based our cost estimates on the May 2015 Bureau of Labor Statistics National Occupational Employment and Wage Estimates are using the average hourly wage of \$45.60 per hour for an Administrative Services Manager and we have used a figure (\$91.20/hour) that is double this hourly wage to account for benefits and other overhead. Altogether these change have increased the financial burden for providers from \$24,498 to \$49,248 per year.

There is also a change to the federal cost estimate. This change is due to the change in the cost for printing. Previously the estimate used the rate of \$0.05 per page; this new estimate follows the current rate of \$0.11 per page. The burden for federal costs has thereby increased from \$113 to \$238.

16. Publication and Tabulation Dates

There are no publication or tabulation dates.

17. Expiration Date

CMS will display the expiration date.

18. Certification Statement

There are no exceptions to the certification statement.