## END STAGE RENAL DISEASE

\*THE FACILITY MUST FILL OUT THE FORM 855A AND RETURN THE <u>ORIGINAL</u> TO ITS FISCAL INTERMEDIARY. When the 855A is approved by the Fiscal Intermediary, a copy of the 855A will be forwarded to the Illinois Department of Public Health (IDPH). <u>Ouestions regarding</u> <u>the 855A should be directed to the Fiscal Intermediary</u>. The 855A can be found at the following website:

CMS 855A form <u>www.cms.hhs.gov/cmsforms/downloads/cms855a.pdf</u>

## \*PLEASE NOTE: When the 855A is approved by your Fiscal Intermediary, it will be forwarded to IDPH. Your intermediary will notify you by mail when the 855A has been sent to us.

All other forms listed on this instruction sheet should be filled out and returned to IDPH at the following address:

Illinois Department of Public Health Division of Health Care Facilities and Programs Section 525 W. Jefferson Street, 4<sup>th</sup> Floor Springfield, IL 62761 Attention: Kevin Fargusson

Questions regarding Medicare Forms <u>ONLY</u>, should be directed to Kevin Fargusson at 217-782-0582, or by e-mail at <u>kevin.fargusson@illinois.gov</u>

## FORMS NEEDED FOR MEDICARE CERTIFICATION

- CMS-3427 End Stage Renal Disease Application/Notification and Survey and Certification Report www.cms.hhs.gov/cmsforms/downloads/cms3427.pdf
- Medicare Intermediary Information 1 original required (www.idph.state.il.us) (Click on Publications then Forms then refer to Medicare Intermediary Section)
- CON approval from the Illinois Health Facilities Planning Board
  <u>www.idph.state.il.us/about/hfpb.htm</u>

## **INFORMATIONAL READING MATERIAL**

- Conditions of Participation and coverage can be found by going to <u>www.cms.hhs.gov/manuals/downloads/som107ap\_h\_esrd.pdf</u>
- Questions regarding CMS form 855A
  <u>www.cms.hhs.gov/MedicareProviderSupEnroll\</u>
- Provider –Supplier Enrollment Contacts www.cms.hhs.gov/MedicareProviderSupEnroll/downloads/contact\_list.pdf