



## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS-381]

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Centers for Medicare & Medicaid Services, Health and Human Services (HHS).

**ACTION:** Notice.

**SUMMARY:** The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including the necessity and utility of the proposed information collection for the proper performance of the agency's functions, the accuracy of the estimated burden, ways to enhance the quality, utility, and clarity of the information to be collected, and the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**DATES:** Comments must be received by **[INSERT DATE 60 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER]**.

**ADDRESSES:** When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. Electronically. You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments.

2. By *regular mail*. You may mail written comments to the following address:

CMS, Office of Strategic Operations and Regulatory Affairs

Division of Regulations Development

Attention: Document Identifier: \_\_\_/OMB Control Number: \_\_\_

Room C4-26-05

7500 Security Boulevard

Baltimore, Maryland 21244-1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA web site by copying and pasting the following web address into your web browser: <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing>

**FOR FURTHER INFORMATION CONTACT:** William N. Parham at (410) 786-4669.

**SUPPLEMENTARY INFORMATION:**

*Contents*

This notice sets out a summary of the use and burden associated with the following information collections. More detailed information can be found in each collection's supporting statement and associated materials (see **ADDRESSES**).

Under the PRA (44 U.S.C. 3501-3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. The term "collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA requires federal agencies to publish a 60-day notice in the **Federal Register** concerning each

proposed collection of information, including each proposed extension or reinstatement of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, CMS is publishing this notice.

### *Information Collection*

1. *Type of Information Collection Request:* Revision of a currently approved collection; *Title of Information Collection:* Medicare Outpatient Physical Therapy/Outpatient Speech Pathology (OPT/OSP) Providers Certification Requirements; *Use:* This is a request for revision of form CMS-381 which is required for initial certification, during the recertification surveys and when the OPT/SLP requests any changes to its locations.

CMS is implementing a program whereby CORF, RHC, OPT/SLP providers and PXR suppliers may recertify every 6 years by self-attesting that they meet the CMS requirements instead of receiving a recertification survey by the State Survey Agencies (SAs). Because of this new program, we have changed the instructions to the CMS-381 form by deleting a reference to recertification surveys and replacing it with a reference to the “recertification attestation process.”

After the start of the self-attestation program, the CMS-381 form will be completed when (1) new OPT/SLP providers enter the Medicare program (initial certification); (2) when existing OPT/OPS providers delete or add a service, or close or add an extension location; or (3) when existing OPT/SLP providers are recertified by the State Survey Agency (SA) through survey or attestation every 6 years.

For deemed OPT/SLP providers under a CMS-approved Accrediting Organization (AO), the CMS-381 will continue to be part of the reaccreditation surveys at least every 36 months. The OPT/SLP providers may render services on their already approved premises and the premises of other institutions (e.g., skilled nursing facilities) or on a premise owned/leased/rented by the OPT/SLP. If the OPT/SLP bills the Medicare program for these services and renders these services in an area within the institution set aside for rehabilitation care, these premises are considered extension locations of

the OPT/SLP. However, a patient's home is not considered an extension location.

Extension locations are considered part of the OPT/SLP provider's primary location and are subject to the same approval policy as is applicable to the OPT/SLP primary site. In addition to meeting applicable sections of the conditions of participation for all outpatient physical therapy/speech pathology providers, these extension locations fall under the OPT/SLP provider agreement and are identified under the OPT/SLP provider number.

Form CMS-381 is used by the SA, AO, and by the CMS Survey Operations Group 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 to ensure the appropriate monitoring of providers' compliance with the Federal requirements.

*Form Number:* CMS-381 (OMB control number: 0938-0273); *Frequency:* Occasionally; *Affected Public:* Private Sector; Business or other for-profit and not-for-profit institutions; *Number of Respondents:* 501; *Total Annual Responses:* 501; *Total Annual Hours:* 229. (For policy questions regarding this collection contact Caecilia Andrews at 410-786-2190.)

**William N. Parham, III,**

*Director,*

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*Office of Strategic Operations and Regulatory Affairs.*

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