Centers for Medicare & Medicaid Services, HHS § 488.735  
more comprehensive review of conditions of participation would determine if a deficient practice exists.

§ 488.720 Extended surveys.  
(a) Purpose of survey. The purpose of an extended survey is:  
(1) To review and identify the policies and procedures that caused an HHA to furnish substandard care.  
(2) To determine whether the HHA is in compliance with one or more or all additional conditions of participation not examined during the standard survey.  
(b) Timing and basis for survey. An extended survey must be conducted not later than 14 calendar days after completion of a standard survey which found that a HHA was out of compliance with a condition of participation.

§ 488.725 Unannounced surveys.  
(a) Basic rule. All HHA surveys must be unannounced and conducted with procedures and scheduling that renders the onsite surveys as unpredictable in their timing as possible.  
(b) State survey agency’s scheduling and surveying procedures. CMS reviews each survey agency’s scheduling and surveying procedures and practices to assure that the survey agency has taken all reasonable steps to avoid giving notice of a survey through the scheduling procedures and conduct of the surveys.  
(c) Civil money penalties. Any individual who notifies an HHA, or causes an HHA to be notified, of the time or date on which a standard survey is scheduled to be conducted is subject to a Federal civil money penalty not to exceed $2,000.

§ 488.730 Survey frequency and content.  
(a) Basic period. Each HHA must be surveyed not later than 36 months after the last day of the previous standard survey. Additionally, a survey may be conducted as frequently as necessary to—  
(1) Assure the delivery of quality home health services by determining whether an HHA complies with the Act and conditions of participation; and  
(2) Confirm that the HHA has corrected deficiencies that were previously cited.  
(b) Change in HHA information. A standard survey or an abbreviated standard survey may be conducted within 2 months of a change, or knowledge of a change, in any of the following:  
(1) Ownership;  
(2) Administration; or,  
(3) Management of the HHA.  
(c) Complaints. A standard survey, or abbreviated standard survey—  
(1) Must be conducted of an HHA within 2 months of when a significant number of complaints against the HHA are reported to CMS, the State, the State or local agency responsible for maintaining a toll-free hotline and investigative unit, or any other appropriate Federal, State, or local agency; or  
(2) As otherwise required to determine compliance with the conditions of participation such as the investigation of a complaint.

§ 488.735 Surveyor qualifications.  
(a) Minimum qualifications. Surveys must be conducted by individuals who meet minimum qualifications prescribed by CMS. In addition, before any State or Federal surveyor may serve on an HHA survey team (except as a trainee), he/she must have successfully completed the relevant CMS-sponsored Basic HHA Surveyor Training Course and any associated course prerequisites. All surveyors must follow the principles set forth in § 488.24 through § 488.28 according to CMS policies and procedures for determining compliance with the conditions of participation.  
(b) Disqualifications. Any of the following circumstances disqualifies a surveyor from surveying a particular agency:  
(1) The surveyor currently works for, or, within the past two years, has worked with the HHA to be surveyed as:  
(i) A direct employee;  
(ii) An employment agency staff at the agency; or  
(iii) An officer, consultant, or agent for the agency to be surveyed concerning compliance with conditions of