

Facility-Wide Wireless Internet Facility Questionnaire

CMS is interested in learning more about wireless internet access for residents within facilities. **If your facility does not have facility-wide wireless internet for (Wi-Fi) for residents, please complete the following questionnaire.** Our goal in collecting this information is to gain a better understanding of the barriers that exist to having facility-wide Wi-Fi internet availability to residents. Your response will help inform our efforts to make potential funding supports available to facilities in need.

1. Name of Facility: _____
2. CMS Certification Number (CCN): _____
3. Primary Contact Name: _____
4. Primary Contact Phone #: _____
5. Address of Facility: _____
6. County/State: _____
7. Number of Certified Beds: _____ beds
8. Average Daily Census: _____ residents
9. If your facility does not provide facility-wide Wi-Fi access to residents, please select the most appropriate option from the list below, and provide additional information in section 10 below:
 - ☐ Our facility is located outside of a service area for a company to provide or support facility-wide Wi-Fi.
 - ☐ Our company firewalls prevent staff/resident access to internet/Wi-Fi.
 - ☐ Our facility staff have Wi-Fi access, but residents do not (please explain why below).
 - ☐ Our facility is unable to pay for Wi-Fi access to all staff and residents.
 - ☐ Our facility currently provides internet access through another source (e.g., hard-wired computers available for residents in a community room). Please specify the source: _____

10. Explanation or Other Information:

After completing the questionnaire, please submit response to the CMP-info@cms.hhs.gov mailbox, no later than December 22, 2023.