

MEMORANDUM

Texas Department of Human Services * Long Term Care/Policy

TO: LTC-R Regional Directors
Section/Unit Managers

FROM: Marc Gold
Section Manager
Long Term Care-Policy
State Office MC: W-519

SUBJECT: Regional Survey & Certification Letter #98-20

DATE: February 5, 1999

The attached RS&C Letter is being provided to you for information purposes and should be shared with all professional staff.

- RS&C Letter No. 98-20--Clarification of Revisit Policy; Call Beverly Tucker, Section Manager, Professional Services, at (512) 438-2631.

If you have any questions, please direct inquiries to the individuals or sections listed above.

~Original Signature on File~

Marc Gold

Attachment

DEPARTMENT OF HEALTH & HUMAN SERVICES
Health Care Financing Administration

Region VI
1301 Young Street, Room 833
Dallas, Texas 75202

October 5, 1998

REGIONAL SURVEY AND CERTIFICATION LETTER NO: 98-20

To: All State Survey Agencies (Action)
All Title XIX Single State Agencies (Information)

Subject: Clarification of Revisit Policy

The purpose of this letter is to ensure that all State Survey Agencies have received and implemented the clarification which has been made to the revisit policy for Long Term Care facilities. The attached memorandum was issued by the Health Care Financing Administration on August 20, 1998. It represents a revision to the interim policy which was issued on December 6, 1995.

The original interim policy states that on-site revisits would no longer be required if the deficiency(ies) for follow-up at each revisit were at a scope and severity of "D, E, or F" and no substandard quality of care had been determined. In other words, the decision for an on-site revisit could be based on the citations documented on the **current** Statement of Deficiencies (HCFA 2567L) which were to be corrected. HCFA provided the State this discretion in determining if on-site verification of correction was necessary with each follow-up revisit.

Based on the memorandum dated August 20, 1998, HCFA is clarifying this interim revisit policy so that **discretion to waive any on-site revisit** will be related to the **scope and severity of the deficiencies cited at the original survey only**. The clarified revisit policy is: "If the original survey has deficiencies with a scope and severity of G or above, on-site revisits must occur on all subsequent revisits until substantial compliance is determined." Please note and implement this change in policy.

If you have any questions concerning the information, please contact Virginia Tibbetts at (214) 767-4411, Wanda Eskue at (214) 767-4428 or Theresa Bennett at (214) 767-4416.

Sincerely,

{Signature on File}

Molly Crawshaw for
Calvin Cline, Chief
Survey and Certification Operations Branch

Division of Medicaid and State Operations

Enclosures

DEPARTMENT OF HEALTH & HUMAN SERVICES
Health Care Financing Administration

MEMORANDUM

DATE: August 20, 1998

FROM: Director
Center for Medicaid and State Operations, HCFA

SUBJECT: Clarification of Revisit Policy

TO: Associate Regional Administrators
Division of Medicaid and State Operations
Regions I - X

State Agency Directors

Last month, the General Accounting Office (GAO) released the findings of its study of alleged abuse of residents in California nursing homes. GAO's findings underscored that we must do more to improve the quality of care that nursing home residents receive and it specifically signaled the need for enhanced Federal oversight and stronger enforcement.

As a result of these findings, we re-examined our revisit policy and are clarifying it to make it explicit that the discretion to waive an onsite revisit must be based only on the deficiencies found during the survey and not those found at any subsequent revisit(s). In other words, if a facility is surveyed and deficiencies are found to constitute substandard quality of care or are at Box G or above, the discretion to waive an onsite revisit will not apply to the facility now *or* at a later date, regardless of the results of subsequent revisits. When this scenario occurs, onsite revisits must continue until the facility is found to be in substantial compliance with all requirements. This clarification, which is effective immediately, reflects our conclusion that facilities having serious noncompliance problems require vigilant monitoring of corrective actions.

We also wish to reiterate facility responsibility at §483.10(g)(1) to make survey results available for examination in a place readily accessible to residents of that facility and to post a notice of their availability in the facility. In an effort to further expand the availability of such information, the Health Care Financing Administration will soon be posting individual nursing home survey results on the Internet.

Any questions about the revisit policy should be directed to Pat Miller on (410) 786-6780 or through E-mail to Pmiller@hcfa.gov.

~Signature on File~

Sally K. Richardson

cc: Regional Administrators