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**Center for Clinical Standards and Quality/Quality, Safety and Oversight Group**  
**Frequently Asked Questions for State Survey Agency and Accrediting Organization**  
**Coronavirus Disease 2019 (COVID-19) Survey Suspension**

**Date: March 13, 2020**

On March 4, 2020, The Center for Medicare & Medicaid Services (CMS) suspending survey activity for certain non-emergency state survey inspections, allowing inspectors to prioritize the most serious health and safety threats like infectious diseases and abuse. Below, please find frequently asked questions for State Surveyors, healthcare facilities, patients and caregivers and accrediting organizations.

Please note that providers/suppliers surveyed by an accrediting organization should refer to the Accrediting organization section for applicable FAQs.

**State Agency Surveyors**

**1. Why is The Center for Medicare & Medicaid Services (CMS) suspending survey activity of healthcare facilities?**

CMS is not suspending all state survey activity. CMS is only suspending certain non-emergency state survey inspections, allowing inspectors to prioritize the most serious health and safety threats like infectious diseases and abuse. Additionally, surveys for existing in-process enforcement actions and surveys mandated by law to occur within specific time intervals will continue uninterrupted, as well as initial certification surveys for new providers to support building healthcare capacity. In other words, revalidation surveys and non-statutory recertification surveys are suspended to allow inspectors and facilities to focus on infection control and preparing for the Coronavirus Disease 2019 (COVID-19). This shift in prioritization will allow State inspectors to focus on addressing the spread of COVID-19.

**2. How long is the suspension?**

CMS is working closely with other state and Federal partners to determine an appropriate timeframe for the suspension and will provide updates as the situation evolves and more information becomes available. Currently, we anticipate this to be time-limited, but it will remain in effect until announced otherwise.

**3. How should we handle open/ongoing survey actions?**

Please refer to the Suspension of Survey Activities memo released on March 4, 2020.

**4. What triggers/complaints warrant a new survey action during the time of suspension?**

CMS is committed to ensuring continuity of oversight activities during this important time of heightened vigilance related to COVID-19. Therefore, any information or complaints that raise concerns related to the presence of an immediate jeopardy situation or allegations related to abuse will be investigated. For situations that are specific to COVID-19, CMS will coordinate with the Centers for Disease Control and Prevention (CDC) as well as other State and local health departments on the timing and conduct of investigations.

**5. Does this apply to CLIA surveys?**

No, not at this time. CLIA surveys will continue as planned unless CLIA surveyors are notified otherwise.

**6. Will validation surveys of accredited providers continue or be suspended as well?**

In order to decrease burden on facilities so they can focus on infection control matters and ensure State Agency surveyors retain capacity to respond to any potentially emergent concerns, CMS is also temporarily suspending validation surveys of facilities participating in Medicare via accreditation until further notice.

**7. How does this announcement impact accrediting organizations and the facilities that participate in Medicare through their accreditation status?**

CMS is requesting that accrediting organizations (AOs) with CMS-approved programs follow the same guidance that is being provided to the State Survey Agencies. CMS is communicating directly with all AOs to share information and facilitate a coordinated approach across healthcare facilities nationwide. While we are still in the early stages of the response and information sharing, we will provide updates on any planned actions specific to certain AOs as they become available.

### **Healthcare Facilities**

**1. What should healthcare facilities expect during the suspension period?**

Healthcare facilities should focus efforts on infection disease protocols, including preparing for treating patients with COVID-19. Facilities should monitor the CDC website for information and resources and communicating with their local health department when needed (CDC Resources for Health Care Facilities: <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>).

Healthcare facility surveys may occur under certain circumstances during the suspension. CMS has prioritized the types of surveys that may occur in order to allow facilities to continue preparations as new information related to COVID-19 becomes available. CMS is coordinating with State and local health departments, accrediting organizations, and the Centers for Disease Control and Prevention (CDC) to minimize impact to providers while retaining the ability to direct resources to areas of concern. Our response facilitates resource allocation in order to maintain certain ongoing health and safety activities with the ability to respond to emerging concerns related to COVID-19.

**2. How should healthcare facilities triage presumptive or confirmed cases of COVID-19?**

CMS has worked with the CDC to provide initial guidance for hospitals and nursing homes related to COVID-19. This guidance can be found at the following locations:

<https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and/guidance-infection-control-and-prevention-concerning-coronavirus-disease-covid-19-faqs-and>

<https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and/guidance-infection-control-and-prevention-coronavirus-disease-2019-covid-19-nursing-homes>

Health facilities should continue to monitor the CDC website for new information and resources related to triage of presumptive or confirmed cases of COVID-19 (CDC Resources for Health Care Facilities: <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>).

**3. What should we do if we anticipate shortfalls in Personal Protective Equipment (PPE) and are unable to obtain new supplies?**

Facilities should monitor the CDC website for information and resources related to the use of PPE for COVID-19 (CDC Resources for Health Care Facilities: <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>). Facilities should also coordinate with other suppliers, healthcare coalitions, or state and local public health authorities on availability of PPE.

## **Patients or Caregivers**

### **1. What does a suspension in healthcare facility inspections mean to me?**

CMS is committed to ensuring continuity of health and safety oversight activities during this important time of heightened vigilance related to the COVID-19. The agency is prioritizing the utilization of resources in order to be able to provide a robust response to emerging concerns. Additionally, our actions will allow facilities to be able to focus their efforts on infection control preparation as more information on the COVID-19 becomes available. Our actions will allow CMS to maintain inspections for the most critical areas of concern to the public health and safety while supporting facilities in the ability to prepare and respond.

CMS is only temporarily discontinuing lower priority survey activities conducted by State Survey Agencies. Therefore, States will continue to conduct surveys for situations involving the most serious concerns related to health and safety, including for any allegations related to potential abuse and facilities that have a history of infection control concerns. CMS will also continue any follow-on actions related to existing enforcement activities that have been ongoing prior to this announcement. Additionally, some survey inspections are mandated by law to occur within certain timeframes so these will continue as well as initial certification surveys for new facilities that support building capacity in the healthcare system. Temporarily discontinuation of non-essential inspections will allow state inspectors to prepare and focus on addressing the spread of COVID-19.

For healthcare facilities that participate in Medicare through a Medicare-approved accrediting organization, also known as “deemed status,” CMS is requesting these entities follow the same guidance as that provided to States. CMS is communicating directly with all accrediting organizations that have Medicare-approved programs to share information and facilitate a coordinated approach across all healthcare facilities nationwide. While we are still in the early stages of the response and information sharing, we will provide updates on any planned actions specific to certain accrediting organizations as they become available.

### **2. What steps should I take to report quality of care concerns**

Quality of care concerns may continue to be reported to the State health department. CMS works closely with State health departments to coordinate the intake and investigation of complaints and/or concerns. You can find contact information for your State health department online at their website or visit the [CMS webpage](#) that provides hyperlinks for each State health department.

## **For Accrediting Organizations and Provider/Supplier Surveys by Accrediting Organizations**

### **1. Will States be conducting validation surveys?**

No, we do not intend to carry out validation surveys of CMS-approved accreditation organizations during the suspension period.

### **2. How does this affect performance measures and the Report to Congress?**

We do not intend to have this period of updated priorities negatively impact accrediting organizations related to the performance measures. We expect to evaluate in the Report to Congress only the validation surveys that were conducted outside of any suspension period.

### **3. How will AOs know what facilities are impacted by the Coronavirus to be able to notify and coordinate with the appropriate CMS location?**

CMS is working with CDC to identify providers/suppliers impacted by COVID-19. Until that process is established, AOs should ask that all providers/suppliers notify them if there are any

patients with COVID-19 and may contact provider/suppliers up to one-month in advance to receive updated information. We will update this process as it develops. The intent is that the AO would wait until CDC (and any other relevant Federal/State/Local response agencies) have cleared the facility for survey.

**4. Can we modify the unannounced survey requirement so that we can call the facility to see if there are any COVID-19 issues before we survey?**

CMS is not suspending the requirement that surveys be unannounced.

**5. Will CMS be conducting corporate onsite visits and survey observations during the suspension?**

CMS will continue conducting corporate onsite visits, but will not be conducting onsite survey observations during the suspension period. We will use offsite records as appropriate to determine the comparability during the suspension period.

**6. If an accredited provider or supplier is not accredited before the end of 36 months, is there a penalty to the provider or the AO?**

No; for reaccreditation surveys, there will not be a negative impact to the provider or AO (for example de-certifying the provider). We expect that AOs would have a “catch-up” period following the suspension so that delays do not persist far beyond the end of the suspension period. AO’s should work with CMS to communicate the degree to which providers have exceeded their 36-month accreditation and the duration of the expected catch-up period.

**7. Does the suspension impact existing condition-level findings that are on an enforcement track?**

No, we expect the AO to complete revisit surveys in order to determine the extent to which the provider has corrected any deficiencies and returned to compliance.

**8. Is there an endpoint to the suspension and prioritization of surveys?**

CMS is working closely with other state and Federal partners to determine an appropriate timeframe until normal operations resume and will provide updates as the situation evolves and more information becomes available. We currently anticipate this to be time limited but will remain in effect until announced otherwise.

**9. Are initial surveys suspended?**

Within the seven survey priorities outlined in the memo, initial certification surveys are the fifth priority. The intent is to continue to allow expanded health care capacity in communities; therefore, initial surveys may be conducted.

**10. If an ESRD facility intends to add services (such as home dialysis) or relocate, which requires an onsite survey, may we conduct those surveys?**

Yes, CMS does not want to restrict Medicare beneficiaries’ access to dialysis modalities, particularly when home therapies may also decrease the chance of exposure of patients to someone with COVID-19.

**11. Does this mean that all complaints for Non-Long Term Care providers are suspended?**

AOs should prioritize complaints involving allegations that patients are in immediate jeopardy to their health or safety from any provider or certified supplier-type, as well as all for infection control and abuse allegations, consistent with the memo.

**12. Can an AO conduct reaccreditation surveys?**

AOs may conduct reaccreditation surveys; however, we are requesting that AOs prioritize providers/suppliers in States affected by COVID-19 and those that have a history of infection

control deficiencies, as discussed in the memo. CMS is also requesting that AOs review their process of surveying for infection control issues and focus on those issues while onsite.

**13. If our AO also conducts licensure surveys for States, is that also suspended?**

Our guidance only applies to federal requirements for Medicare/Medicaid. CMS does not have any jurisdiction over state licensure laws. AOs should contact the State if they have any licensure-related questions.

**14. Clarification on follow up surveys (surveys to close out condition level findings) – Do we continue with all, or only those with serious IC deficiencies and IJs?**

You may conduct follow-up surveys to close out those surveys that have identified Condition-level findings.

**15. How does this suspension effect non-Medicare or Medicaid participating facilities – VA, DOD, etc.? Are they also stopping surveys?**

The suspension is related to Medicare/Medicaid certified facilities. This does not affect surveys or oversight conducted under other authorities such as the Department of Veterans Affairs or Department of Defense.