

CMS Updates Survey Prioritization Guidance

On March 23, CMS announced further suspension and re-prioritization of survey activity in response to the COVID-19 pandemic. [Memo QSO-20-20-ALL](#) highlights this re-prioritization, as well as new guidance for non-nursing home settings on visitors and screening, and access to all settings for health care providers. Analysis of this additional guidance is forthcoming. The analysis on survey re-prioritization follows below.

Effective March 20 for a period of 3 weeks only, the following types of surveys will be prioritized for all CMS-licensed provider types:

- IJ complaint and facility-reported incident surveys: State survey agencies (SSAs) will conduct surveys related to complaints and facility-reported incidents (FRIs) that are triaged at the Immediate Jeopardy (IJ) level, including revisits necessary to confirm removal of IJ.
- Targeted Infection Control Surveys: Federal and state surveyors will conduct targeted Infection Control surveys of providers identified through collaboration with the Centers for Disease Control and Prevention (CDC) and the HHS Assistant Secretary for Preparedness and Response (ASPR).
- Initial certification: Initial certification surveys will be authorized within current guidance and prioritization in order to help increase capacity.

The following surveys will not be conducted during this 3-week period of prioritization:

- Standard surveys, including the Life Safety Code and Emergency Preparedness components of these surveys.
- Complaint surveys triaged at a level below IJ.
- Revisit surveys that are not related to situations of IJ.

Surveys that are in process and do not meet the above criteria will be ended and surveyors will exit. When a survey is conducted due to a complaint or facility-reported incident triaged at IJ level, but the facility is ultimately not cited at IJ level, a revisit will not occur during the prioritization period. The case will be held and the facility has the option to hold submission of the plan of correction during the prioritization period. CMS will issue forthcoming guidance to address these scenarios. Additionally, CMS has recommended discretion in the imposition of enforcement remedies at this time. During the prioritization period, Denials of Payment for New Admissions (nursing homes) and Suspension of Payment for New Admissions (home health) will be suspended, as will per day civil money penalties for both provider types.

In addition to announcing the re-prioritization of survey activities, CMS has released streamlined Infection Control survey tools that will be utilized in all continued surveys, regardless of the cause for survey. For example, a state surveyor investigating an incident that has been triaged at the IJ level will also utilize the Infection Control tool appropriate to that provider type during the survey. CMS encourages providers to utilize these Infection Control tools to complete self-assessments and warns that state survey agencies may request these self-assessments if conducting an on-site survey. CMS further recommends sharing results of these self-assessments with the Healthcare-Associated Infections (HAI) program within the state or local health department. These tools evaluate infection control practices under the following categories:

- Standard and transmission-based precautions
- Hand hygiene
- Personal protective equipment
- Resident care

- Infection Prevention and Control Program including infection surveillance, antibiotic stewardship, and influenza/pneumococcal vaccines
- Visitor procedures
- Education, monitoring, and staff screening
- Emergency preparedness relative to staffing emergencies

What This Means for Providers

The suspension of surveys will support nation-wide efforts for containment of the virus and conservation of personal protective equipment (PPE). CMS has instructed surveyors not to enter a facility if they are unable to meet PPE expectations as outlined in the most recent CDC guidance. These measures will also allow providers to focus on the safety and well-being of the individuals in their care at this critical time. The release of the new tools will prove a valuable resource for members in preparation for or response to COVID-19 in their communities. LeadingAge reminds members, as noted above, that surveyors may request proof of this self-assessment if a survey is conducted.