Report in Brief

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U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES OFFICE OF INSPECTOR GENERAL

Why OIG Did This Review

State survey agencies (State agencies) must verify that nursing homes corrected identified deficiencies, such as the failure to provide necessary care and services, before certifying whether the nursing homes are in substantial compliance with Federal participation requirements for Medicare and Medicaid. In our previous reviews of nine State agencies, we found that seven did not always verify or maintain sufficient evidence that they had verified nursing homes' correction of deficiencies identified during surveys.

Our objectives were to (1) summarize the results of our previous reviews that identified instances in which State agencies did not always verify nursing homes' correction of deficiencies in accordance with Federal requirements and (2) assess the Centers for Medicare & Medicaid Services' (CMS's) guidance to State agencies on verifying nursing homes' correction of deficiencies and maintaining documentation to support verification.

How OIG Did This Review

We summarized the results of our previous reviews and assessed CMS's guidance to State agencies on verifying nursing homes' correction of deficiencies and interim guidance on maintaining documentation to support verification. In our previous reviews, we reviewed a stratified random sample of 100 deficiencies for each State agency.

CMS Guidance to State Survey Agencies on Verifying Correction of Deficiencies Needs To Be Improved To Help Ensure the Health and Safety of Nursing Home Residents

What OIG Found

Of the nine selected State agencies in our previous reviews, seven did not always verify nursing homes' correction of deficiencies as required. Specifically, for 326 of the 700 sampled deficiencies, these State agencies did not obtain evidence of nursing homes' correction of deficiencies or maintain sufficient evidence that they had verified correction of deficiencies. For less serious deficiencies, the practice of six of the seven State agencies was to accept a nursing home's correction plan as confirmation of substantial compliance with Federal participation requirements without obtaining from the nursing home the evidence of correction of deficiencies. Further, three of the seven State agencies had technical issues with maintaining supporting documentation in the software-based system used to support the survey and certification process; as a result, they did not have sufficient evidence of correction of deficiencies. If State agencies certify that nursing homes are in substantial compliance without properly verifying the correction of deficiencies and maintaining sufficient documentation to support the verification of deficiency correction, the health and safety of nursing home residents may be placed at risk.

In addition to summarizing the issues identified during our previous reviews, we determined that CMS's guidance to State agencies on verifying nursing homes' correction of deficiencies and maintaining documentation to support verification needed to be improved.

What OIG Recommends and CMS Comments

To help ensure the health and safety of nursing home residents, we recommend that CMS take specific actions to (1) improve CMS's guidance to State agencies on verifying nursing homes' correction of deficiencies and maintaining documentation to support verification, (2) consider improving its forms related to the survey and certification process, and (3) work with State agencies to address technical issues with the system for maintaining supporting documentation. The "Recommendations" section in the body of the report lists our recommendations in detail.

CMS concurred with our recommendations and provided information on actions that it had taken or planned to take to address our recommendations.