STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

Deidre S. Gifford, MD, MPH **Acting Commissioner**



Ned Lamont Governor Susan Bysiewicz Lt. Governor

TO:

Nursing Homes

FROM:

Acting Commissioner Deidre S. Gifford, MD, MPH Rada 5.

CC:

Deputy Commissioner Heather Aaron, MPH, LNHA

Barbara Cass, RN, Branch Chief, Healthcare Quality and Safety Branch Donna Ortelle, Section Chief, Facility Licensing and Investigations Section

DATE:

May 28, 2020

SUBJECT:

Changes to Disclosure of Nursing Homes Survey Results

As we are all aware, the COVID-19 pandemic has put renewed focus on the regulatory landscape for long-term care facilities in Connecticut and across the nation. Part of our response is a change in the public reporting of Nursing Home Survey Results. We believe this is important to ensure a sufficient degree of transparency for residents, family and the general public, while respecting the position and appeal rights of individual skilled nursing home providers.

Prior to the COVID-19 pandemic, the Department of Public Health would survey nursing homes and, when violations of federal regulations were identified, a federal survey statement of deficiencies (CMS 2567 form) would be issued and made available to the facility. Federal regulations provide the nursing homes ten calendar days to submit a plan of correction responding to the DPH statement of deficiencies. In addition, within that same ten-day timeframe, the nursing home can submit a request for Informal Dispute Resolution (IDR) to address the deficiencies. Previously, the Department has waited until the end of this ten-day period to publicly post information on deficiencies for nursing home residents and their family members/advocates.

Going forward, in the interest of transparency, DPH will now exercise its discretion under the Centers for Medicare and Medicaid Services (CMS) State Operations Manual to make inspection reports and deficiency findings available to the public three business days after they are made available to the facility.

Here is the specific discretion provided at the federal level by CMS:

7903.2 - Disclosure Time Frames

(Rev. 63, Issued: 09-10-10, Effective: 09-10-10, Implementation: 09-10-10)

Although the State survey agency or regional office may choose to wait as long as 14 calendar days before disclosing the information listed in §7903.1 above in order to obtain a facility response or plan of correction prior to disclosure, the information may be disclosed at any time after it has been made available to the facility. The information could be disclosed as quickly as the day after it is made available to the facility, or



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as many as 14 days afterward. The State survey agency or regional office makes the determination about the appropriateness of the timing of the disclosure.

In situations generating media interest, the State survey agency should notify the regional office prior to the initial public release of the Form CMS-2567. Regional offices are expected to extend the same courtesy to State survey agencies when regional office survey findings have the potential for high publicity.

CMS regulations permit DPH to make public the statement of deficiencies at the same time it is made available to the nursing home. Especially given that families are not able to view statements of deficiencies, violations letters and citations at the facilities due to visitor restrictions, DPH will post these documents for public access at the following link:

https://www.elicense.ct.gov/Lookup/OnlineReportExecute.aspx?queryIdnt=25331

It will not be the intent of DPH to proactively promote any individual reports to any member of the public or the media for publication. The Department will provide the above link for the public and the media to be able to search for reports, findings of deficiency, plans of correction, and citations. When a nursing home requests an informal dispute resolution (IDR) following a deficiency finding, the nursing home will indicate on the statement of deficiencies that they do not agree with the finding(s) and an informal dispute resolution has been requested in accordance with §488.331of the code of federal regulations. Upon completion of the IDR, if changes are made to the statement of deficiency as a result, the revised statement of deficiency reflecting those changes will be posted online.

When deficiencies are posted, DPH will preface the deficiency statements with the following caption: "The nursing home has an opportunity to appeal these findings and the attached findings may be removed as a result of an appeal by the provider. The nursing home must also provide a plan of correction for all findings and has up to 10 days to submit a plan of correction. Once the plan of correction is filed, it will be uploaded to this page."

We understand that this change in public reporting is a significant one in terms of the timeframe, and we will work with you to ensure that it is implemented fairly for all long-term care providers and the residents in your care and their families. On behalf of the staff of DPH, I want to thank you for your dedication to the goal of providing the highest-quality care during this pandemic and beyond.