



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
*Aging and Long-Term Support Administration*  
*PO Box 45600, Olympia, Washington 98504-5600*

August 28, 2020

**AL TSA: ICF/IID #2020-033**  
**QSO-20-35-ALL - ENFORCEMENT CASES HELD DURING THE PRIORITIZATION PERIOD  
AND REVISED SURVEY PRIORITIZATION**

Dear ICF/IID Superintendent:

Because of the COVID-19 related national health emergency, in March 2020, the Centers for Medicare and Medicaid Services (CMS) prioritized surveys by authorizing modification of timetables and deadlines for the performance of certain required survey and enforcement activities. With [QSO-20-35-ALL](#), released on August 17, 2020, CMS is revising their survey guidance to expand the number of survey activities and giving state agencies direction on resuming enforcement activities suspended during the pandemic.

**Expansion of Survey Activities.**

In March 2020, CMS issued two memoranda, [QSO-20-12-ALL](#) and [QSO 20-20-ALL](#), which limited survey activity to focused infection control surveys, investigation of complaints and facility reported incidents alleging immediate jeopardy (IJ) to patient and resident health and safety, and revisit surveys necessary to verify removal of previously identified IJ deficiencies.

In addition to ongoing focused infection control surveys, CMS encourages state agencies to resume normal survey activities while also addressing the backlog of surveys that were postponed as directed in QSO 20-20-ALL. Once a state has entered the federal Phase 3 of reopening (based on White House Guidance for State/Regional reopening), or earlier at the state's discretion, states should resume normal survey activities as soon as they have the resources while prioritizing their survey backlog as follows (descending in priority):

- Revisit surveys for past non-compliance that do not otherwise qualify for a desk review;
- Complaint surveys triaged as non-IJ level or higher that have not been completed;
- Initial surveys of new providers;
- Past-due recertification surveys with a statutorily required survey interval.

During the period of the COVID-19 Public Health Emergency, surveyors will continue to utilize the COVID-19 Focused Infection Control Survey: Acute and Continuing Care specified in QSO-20-20-ALL as part of any survey that is conducted.

While CMS recognizes that resumption of surveys will depend on state reopening plans, staffing, and resources, CMS is requesting that states work with their respective CMS locations to discuss plans and proposed timeframes for completion of required surveys postponed due to the COVID-19 Public Health Emergency.

**Enforcement Guidance.**

QSO 20-20-ALL directed state agencies to suspend enforcement cycles, except for enforcement actions for unremoved IJ deficiencies. CMS memo QSO-20-35-ALL gives guidance for state agencies to resolve the suspended enforcement cases and is expanding the desk review policy.

**Plans of Correction (POC) and Expanded Desk Review policy.** Under QSO-20-20-ALL, providers were permitted to delay the submission of a POC until the prioritization period ended. QSO-20-35-ALL provides guidance for closing unresolved enforcement cases that were suspended under QSO-20-20-ALL as follows:

- All open surveys with cited deficiency tags must have an acceptable POC and supporting evidence in order for the tags to be corrected.
- Providers will have 10 calendar days from the effective date of QSO-20-35-ALL to submit their POCs for surveys that ended prior to June 1, 2020. POCs for surveys that ended, or will end, on or after or after June 1, 2020 will follow the normal POC submission process.
- If providers cannot allocate resources to develop and implement a POC due to a current outbreak, they may contact the state agency to request an extension.
- State surveyors can perform desk reviews to determine compliance for all open surveys cited at any level of noncompliance, except for unremoved IJ. The expanded desk review applies only to cases held from March 23, 2020 to May 31, 2020.
  - RCS will request facilities submit evidence that supports correction of noncompliance. A desk review cannot be completed without supporting evidence from facilities.
- Beginning June 1, 2020, all onsite re-visits are authorized and should resume as appropriate.

Thank you for your continued commitment to resident health and safety. If you have questions specific to the QSO memorandum, please contact [QSOG\\_EmergencyPrep@cms.hhs.gov](mailto:QSOG_EmergencyPrep@cms.hhs.gov). If you have other questions, please contact Debra Hoeman, Interim ICF/IID Policy Unit Manager at (360) 725-3210 or [debra.hoeman@dshs.wa.gov](mailto:debra.hoeman@dshs.wa.gov).

Sincerely,



Candace Goehring, Director  
Residential Care Services

DSHS: "Transforming Lives"