



December Reflections

FROM AHCA:

Department of Labor Overtime Rule Struck Down

A federal judge in Texas struck down the “Overtime Rule” from the U.S. Department of Labor (DOL) that would raise the minimum salary threshold for employees who are classified as “exempt” from payment of overtime wages under the white-collar exemptions to the Fair Labor Standards Act.

Under this DOL rule, the salary threshold requirements for employees to be classified as “exempt” under the “white collar” exemptions increased in stages, the first going into effect on July 1, 2024. The next increase was scheduled for January 1, 2025. For more background about the rule, please read [AHCA/NCAL's analysis](#) developed when the rule was finalized (login required).

DOL could possibly appeal and try to get the rule reinstated in these few remaining weeks, but the incoming Trump Administration would likely not be in favor of such an appeal.

If you have any questions, please feel free to contact AHCA/NCAL's Dana Ritchie at dritchie@ahca.org.

FROM CMS: THIS ONE IS BIG AND NEEDS ATTENTION TO PLAN AHEAD

The Centers for Medicare & Medicaid Services on Monday issued “significant revisions” to its long-term care surveyor guidance, with changes affecting everything from admission and discharge standards to the use of psychotropic medications and newly adopted infection prevention practices.

CMS released an advance copy of the 900-page document online, including new critical element pathways, to give providers and surveyors time to adjust to the new requirements before they go into effect Feb. 24, 2025.

A significant portion of the changes are related to chemical restraints and unnecessary psychotropic medication.

“The intent of these requirements is to ensure residents only receive psychotropic medications when other nonpharmacological interventions are clinically contraindicated,” the guidance states. “Also, residents must remain on psychotropic medications only when a gradual dose reduction and behavioral interventions have been attempted and/or deemed clinically contraindicated.”

The regulations and guidance for the unnecessary use of psychotropics have been merged into F605, which emphasizes residents rights, including the right to be “free from chemical restraints imposed for purposes of discipline or convenience.”

“This change will help to streamline the survey process, increase consistency, and strengthen our message that facilities must prevent the unnecessary use of psychotropic medications,” CMS said in a memo signed by David Wright, director of quality, safety and oversight.

The agency said guidance regarding “convenience” had been revised to include situations when medications are “used to cause symptoms consistent with sedation and/or require less effort by facility staff” to meet the resident’s needs.

Additional guidance also was added to emphasize requirements related to the right to be fully informed of and participate in or refuse treatment, noting that before initiating or increasing a psychotropic medication, the resident must be notified of and have the right to participate in their treatment, including the right to accept or decline the medication.

CMS said it revised the Unnecessary Medications, Chemical Restraints/Psychotropic Medications, and Medication Regimen Review Critical Element Pathway to include investigative elements to align with the revised guidance.

The updated guidance also reinforces surveyors’ responsibility to question medical directors over their role in the use of any unnecessary medications, particularly the antipsychotics the agency has long sought to reduce dependence on.

The agency added instructions to investigate adherence to professional standards of practice “when concerns arise regarding residents diagnosed with a condition without sufficient supporting documentation for which antipsychotic medications are an approved indication were added to the guidance at Professional Standards (F658).” This change follows an [audit tool](#) the agency has employed to identify skilled nursing facilities that have patients diagnosed with schizophrenia without medical documentation needed to support that diagnosis or the use of antipsychotics.

Interviewing the facility medical director also was incorporated into the Unnecessary Medications and Quality Assurance & Performance Improvement pathways.

“Health and safety updates are regularly made to address emerging trends in deficiency citations nationwide,” Wright’s memo said. “This ensures that our guidance remains aligned with current standards of practice and reflects the evolving needs of residents. These updates are essential to maintaining the integrity of nursing home care.”

Among other changes CMS is making:

- Adding instructions for investigating Minimum Data Set assessment accuracy and determining whether noncompliance exists when a concern related to insufficient documentation to support a medical condition is identified for a resident receiving an antipsychotic medication.
- Clarifying guidance prohibiting admission agreements from containing language requesting or requiring a third-party guarantee of payment, adding examples of noncompliance.
- Revising guidance for treating acute, chronic, and subacute pain to align with Centers for Disease Control and Prevention definitions; allowing LTC physicians to consider prescribing immediate-release opioids instead of extended-release or long-acting options and emphasizing the need for individualized opioid treatment plans.
- Adding examples of Enhanced Barrier Precautions deficiencies to Appendix PP.

FROM CMS

Care Compare Quarterly Refresh – November 2024

The November 2024 quarterly refresh for the Hospice Quality Reporting Program is now available on [Care Compare](#).

For additional information, please see the FY2025 Hospice Wage Index Final Rule

at <https://www.cms.gov/Center/Provider-Type/Hospice-Center>. Please visit the [Hospice Background and Announcements webpage](#) to review the [Claims-Based Measures Questions and Answers downloadable \(PDF\)](#) for more information on the HCI and HVLDL.

FROM CMS

CMS Releases Proposed Medicare Advantage Rule Aimed at Improving Beneficiary Access to Care

Specifically of interest to long term and post-acute care providers, the proposed rule focuses on:

- **Strengthening Oversight on Prior Authorization and Utilization Management** –The rule proposes stricter policies on how MA plans handle prior authorizations using internal coverage criteria, emphasizing patient safety and requiring clearer, more transparent internal coverage criteria to reduce denials. It also aims to increase guardrails on the use of artificial intelligence and prevent automatic denials of basic benefits without individual assessments.
- **Enhancing Transparency and Access to Information** – The proposed rule requires MA plans to provide accurate provider directory information to CMS to post on the Medicare Plan Finder. It also mandates clearer communication from agents and brokers about assistance programs and the implications of switching from MA to Traditional Medicare.
- **Protecting Beneficiaries from Misleading Practices** – The proposed rule introduces measures to stop misleading advertising, particularly regarding supplemental benefits, and aims to improve protections against deceptive marketing by broadening CMS oversight of MA and Part D communications.

FROM KSFM

Emergency Lockdown in Healthcare Facilities Bulletin

On September 8, 2016 CMS published in the Federal Register the Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers Final Rule. The regulation became effective November 16, 2016.

Health care providers and suppliers affected by this rule were to be compliant and implement all regulations one year after the effective date, on November 15, 2017.

As a part of this requirement, each facility is required to conduct a hazard and vulnerability assessment. While this assessment focuses mainly on natural hazards, facilities must also take into consideration and plan for human hazards such as an active shooter or hostage type situation which would involve a facility lockdown to ensure staff and resident safety.

The Kansas State Fire Marshal’s Office encourages facilities to collaborate with their county emergency management and/or local law enforcement agencies to develop their plan. These agencies have specialized training and can help

develop a plan that will help to ensure safety within the facility and be compatible with law enforcement response procedures.

NFPA 101 Life Safety Code restricts the use of locking devices and requires that visitors, staff, and cognitively aware residents be able to freely exit the building. However, during an emergency lockdown situation, staff and resident safety is the primary consideration. In these situations, the requirements would be suspended until the facility has received notification that the threat has ended.

CMS also provides guidance for developing plans for an active shooter or armed assailant situation. This can be found at <https://files.asprtracie.hhs.gov/documents/on-campus-hospital-armed-assailant-planningconsiderations.pdf>.

FROM APIC & AAPCN VIA McKNIGHTS: (FOLLOW THE LINK AT THE BOTTOM OF THE ARTICLE)

Enhanced barrier guidance now offers skilled nursing providers needed roadmap

Newly released guidance is helping long-term care providers gain clarity on enhanced barrier precautions that the Centers for Medicare & Medicaid Services issued earlier this year.

A collaboration between the Association for Professionals in Infection Control and Epidemiology and the American Association of Post-Acute Care Nursing spawned a practice guidance tool and resource guide that leaders from both organizations said address many of providers' lingering concerns.

"The tool outlines when EBP should be implemented for residents, provides infection control recommendations for routine care activities, and includes case study examples with a self-quiz to help reinforce learning," Denise Winzeler, AAPACN Curriculum Development Specialist, told *McKnight's Long-Term Care News* on Tuesday.

She added that the guide provides a comprehensive list of infection control websites and references that will give LTC staff further confirmation of when to appropriately use EBP.

When CMS made the precautions effective on April 1, they came with very subjective language, Winzeler said.

APIC CEO Devin Jopp added that the guidelines put things in black and white for residents as well as caregivers.

"The new tools are intended to assist healthcare professionals ... with the goal of safeguarding nursing home residents from infection," he said in a [statement released](#) Tuesday.

One of the top inquiries from operators and AAPACN members has been whether staff need to use EBP when transferring a resident throughout the facility, Winzeler said. The guidance gives that answer and also outlines the rationale behind the solution.

The [standards](#), which brought CMS regulations in line with those issued by the Centers for Disease Control and Prevention in 2022, require nursing homes to use EBP to prevent broader transmission of multidrug-resistant organisms and to help protect patients with chronic wounds and indwelling devices.

The protocols were issued to both providers and state survey agencies and added the use of personal protective equipment during high-contact care activities to its infection and prevention and control standards.

APIC and AAPACN's joint guidance is available through APIC's [website](#).

FROM AHCA:

AHCA/NCAL is offering a new webinar, [Preparing for Upcoming CMS Guidance Changes: Key Updates and Action Items for Compliance](#), to provide important information about updated surveyor guidance recently released by the Centers for Medicare and Medicaid Services (CMS).

On November 18, 2024, CMS released [Revised Long-Term Care \(LTC\) Surveyor Guidance: Significant revisions to enhance quality and oversight of the LTC Survey Process](#). The memo included significant changes to guidance in

Appendix PP related to the updated regulatory areas. The changes will be effective, and surveyors will begin surveying based on the revised guidance, on February 24, 2025.

This webinar walks learners through each of the changes to guidance, the updates to the Critical Element Pathways, and provides some tips/action items to be compliant ahead of the effective date. It is free for AHCA/NCAL members and is \$65 for non-members.

All QCOR data below is for FY2024 (October 2023-current)
Average Number of Deficiencies in Standard Health Surveys
National FY2024

Average Number of Deficiencies Report

Region	Average # Deficiencies per Survey by Scope & Severity												Total	# of Surveys
	B	C	D	E	F	G	H	I	J	K	L			
(I) Boston	0.5	0.1	5.2	2.2	0.6	0.2	0.05	0.0	0.04	0.04	0.01	8.9	619	
(II) New York	0.1	0.1	4.5	1.5	0.5	0.1	0.02	0.01	0.05	0.03	0.02	6.9	546	
(III) Philadelphia	0.1	0.1	6.2	2.5	0.5	0.1	0.0	0.0	0.04	0.02	0.01	9.6	1,000	
(IV) Atlanta	0.1	0.1	3.8	1.1	0.5	0.1	0.01	0.0	0.1	0.1	0.02	5.9	1,486	
(V) Chicago	0.04	0.2	4.6	1.2	0.9	0.2	0.0	0.0	0.03	0.0	0.0	7.1	2,576	
(VI) Dallas	0.05	0.1	3.3	2.7	0.5	0.04	0.01	0.0	0.1	0.1	0.01	6.7	1,763	
(VII) Kansas City	0.1	0.2	4.2	2.1	1.0	0.1	0.0	0.0	0.1	0.01	0.01	7.7	1,129	
Iowa	0.1	0.1	3.4	1.2	0.2	0.1	0.0	0.0	0.05	0.02	0.0	5.2	418	
Kansas	0.0	0.2	6.3	1.8	2.1	0.2	0.0	0.01	0.1	0.02	0.03	10.7	174	
Missouri	0.1	0.3	4.5	4.0	1.3	0.1	0.0	0.0	0.1	0.01	0.01	10.4	358	
Nebraska	0.0	0.1	3.1	1.0	1.1	0.1	0.01	0.0	0.02	0.0	0.0	5.4	179	
(VIII) Denver	0.03	0.1	3.6	1.7	0.8	0.3	0.0	0.0	0.04	0.03	0.01	6.5	450	
(IX) San Francisco	0.4	0.05	6.8	3.3	0.6	0.1	0.0	0.0	0.02	0.02	0.01	11.4	1,072	
(X) Seattle	0.04	0.1	7.7	3.2	0.6	0.3	0.01	0.01	0.04	0.01	0.01	12.0	334	
National Total	0.1	0.1	4.7	2.0	0.7	0.1	0.01	0.0	0.1	0.03	0.01	7.8	10,975	
New York	0.1	0.1	4.3	1.3	0.2	0.05	0.02	0.01	0.02	0.03	0.02	6.2	342	
Pennsylvania	0.2	0.1	5.1	2.2	0.4	0.1	0.0	0.0	0.03	0.02	0.01	8.0	751	

National Citation Frequency Overall Surveys FY2024 Top 10
Citation Frequency Report

National Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.		Active Providers=14946		Total Number of Surveys=78198
F0884	Reporting - National Health Safety Network	8,817	23.6%	11.3%
F0880	Infection Prevention & Control	6,553	38.2%	8.4%
F0689	Free of Accident Hazards/Supervision/Devices	6,431	33.0%	8.2%
F0812	Food Procurement, Store/Prepare/Serve Sanitary	5,411	34.2%	6.9%
F0684	Quality of Care	4,638	25.2%	5.9%
F0656	Develop/Implement Comprehensive Care Plan	4,108	23.8%	5.3%
F0761	Label/Store Drugs and Biologicals	3,670	23.3%	4.7%
F0677	ADL Care Provided for Dependent Residents	3,030	17.6%	3.9%
F0609	Reporting of Alleged Violations	2,704	15.6%	3.5%
F0600	Free from Abuse and Neglect	2,660	14.2%	3.4%

National Citation Frequency Report Standard Surveys FY2024 Top 10

Citation Frequency Report

National Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.		Active Providers=14946		Total Number of Surveys=10975
F0880	Infection Prevention & Control	5,078	33.5%	46.3%
F0812	Food Procurement, Store/Prepare/Serve Sanitary	4,960	32.7%	45.2%
F0761	Label/Store Drugs and Biologicals	3,225	21.4%	29.4%
F0689	Free of Accident Hazards/Supervision/Devices	3,012	19.9%	27.4%
F0656	Develop/Implement Comprehensive Care Plan	2,910	19.3%	26.5%
F0684	Quality of Care	2,508	16.5%	22.9%
F0695	Respiratory/Tracheostomy Care and Suctioning	2,303	15.3%	21.0%
F0677	ADL Care Provided for Dependent Residents	2,052	13.6%	18.7%
F0657	Care Plan Timing and Revision	1,861	12.3%	17.0%
F0550	Resident Rights/Exercise of Rights	1,833	12.1%	16.7%

Iowa FY 2024-Standard Top 10

Citation Frequency Report

State Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.		Iowa Active Providers=409		Total Number of Surveys=418
F0812	Food Procurement, Store/Prepare/Serve Sanitary	149	33.3%	35.6%
F0880	Infection Prevention & Control	149	33.0%	35.6%
F0658	Services Provided Meet Professional Standards	110	24.7%	26.3%
F0657	Care Plan Timing and Revision	97	22.5%	23.2%
F0689	Free of Accident Hazards/Supervision/Devices	90	20.8%	21.5%
F0656	Develop/Implement Comprehensive Care Plan	72	17.1%	17.2%
F0550	Resident Rights/Exercise of Rights	68	15.4%	16.3%
F0684	Quality of Care	65	14.9%	15.6%
F0641	Accuracy of Assessments	59	13.7%	14.1%
F0644	Coordination of PASARR and Assessments	56	13.7%	13.4%

Iowa FY2024-Complaint Top 10

Citation Frequency Report

State Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.		Iowa Active Providers=409		Total Number of Surveys=934
F0689	Free of Accident Hazards/Supervision/Devices	154	28.4%	16.5%
F0684	Quality of Care	119	22.7%	12.7%
F0550	Resident Rights/Exercise of Rights	114	22.7%	12.2%
F0658	Services Provided Meet Professional Standards	91	16.4%	9.7%
F0725	Sufficient Nursing Staff	84	15.2%	9.0%
F0677	ADL Care Provided for Dependent Residents	74	13.9%	7.9%
F0880	Infection Prevention & Control	65	13.0%	7.0%
F0609	Reporting of Alleged Violations	54	12.2%	5.8%
F0580	Notify of Changes (Injury/Decline/Room, etc.)	46	10.3%	4.9%
F0584	Safe/Clean/Comfortable/Homelike Environment	43	8.3%	4.6%

Kansas FY2024-Standard Top 10
Citation Frequency Report

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Kansas Active Providers=308		Total Number of Surveys=174
	F0880	Infection Prevention & Control	103	32.8%	59.2%
	F0689	Free of Accident Hazards/Supervision/Devices	101	32.1%	58.0%
	F0812	Food Procurement, Store/Prepare/Serve Sanitary	91	28.9%	52.3%
	F0657	Care Plan Timing and Revision	77	24.4%	44.3%
	F0758	Free from Unnec Psychotropic Meds/PRN Use	66	21.4%	37.9%
	F0761	Label/Store Drugs and Biologicals	57	18.2%	32.8%
	F0550	Resident Rights/Exercise of Rights	56	17.9%	32.2%
	F0756	Drug Regimen Review, Report Irregular, Act On	54	17.5%	31.0%
	F0851	Payroll Based Journal	54	17.5%	31.0%
	F0677	ADL Care Provided for Dependent Residents	47	14.9%	27.0%

Kansas FY2024-Complaint Top 10
Citation Frequency Report

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Kansas Active Providers=308		Total Number of Surveys=1032
	F0689	Free of Accident Hazards/Supervision/Devices	117	28.6%	11.3%
	F0880	Infection Prevention & Control	47	14.0%	4.6%
	F0812	Food Procurement, Store/Prepare/Serve Sanitary	40	12.0%	3.9%
	F0600	Free from Abuse and Neglect	37	9.7%	3.6%
	F0684	Quality of Care	33	9.7%	3.2%
	F0550	Resident Rights/Exercise of Rights	30	9.1%	2.9%
	F0677	ADL Care Provided for Dependent Residents	28	8.4%	2.7%
	F0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	28	8.4%	2.7%
	F0609	Reporting of Alleged Violations	26	7.5%	2.5%
	F0657	Care Plan Timing and Revision	25	7.5%	2.4%

Missouri FY2024-Standard Top 10
Citation Frequency Report

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Missouri Active Providers=509		Total Number of Surveys=358
	F0880	Infection Prevention & Control	218	42.6%	60.9%
	F0812	Food Procurement, Store/Prepare/Serve Sanitary	199	38.7%	55.6%
	F0689	Free of Accident Hazards/Supervision/Devices	131	25.3%	36.6%
	F0761	Label/Store Drugs and Biologicals	131	25.7%	36.6%
	F0584	Safe/Clean/Comfortable/Homelike Environment	120	23.0%	33.5%
	F0658	Services Provided Meet Professional Standards	113	22.2%	31.6%
	F0656	Develop/Implement Comprehensive Care Plan	108	20.8%	30.2%
	F0677	ADL Care Provided for Dependent Residents	100	19.3%	27.9%
	F0623	Notice Requirements Before Transfer/Discharge	72	14.1%	20.1%
	F0695	Respiratory/Tracheostomy Care and Suctioning	71	13.9%	19.8%

Missouri FY2024-Complaint Top 10 Citation Frequency Report

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Missouri Active Providers=509		Total Number of Surveys=3364
	F0689	Free of Accident Hazards/Supervision/Devices	107	17.1%	3.2%
	F0600	Free from Abuse and Neglect	86	12.4%	2.6%
	F0658	Services Provided Meet Professional Standards	73	11.4%	2.2%
	F0677	ADL Care Provided for Dependent Residents	70	10.8%	2.1%
	F0684	Quality of Care	60	9.4%	1.8%
	F0609	Reporting of Alleged Violations	59	10.6%	1.8%
	F0610	Investigate/Prevent/Correct Alleged Violation	55	9.4%	1.6%
	F0584	Safe/Clean/Comfortable/Homelike Environment	52	7.9%	1.5%
	F0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	48	7.3%	1.4%
	F0550	Resident Rights/Exercise of Rights	38	6.1%	1.1%
	F0760	Residents are Free of Significant Med Errors	37	6.1%	1.1%

Nebraska FY2024-Standard Top 10 Citation Frequency Report

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Nebraska Active Providers=186		Total Number of Surveys=179
	F0880	Infection Prevention & Control	113	59.1%	63.1%
	F0812	Food Procurement, Store/Prepare/Serve Sanitary	79	42.5%	44.1%
	F0689	Free of Accident Hazards/Supervision/Devices	48	25.8%	26.8%
	F0684	Quality of Care	44	23.7%	24.6%
	F0758	Free from Unnec Psychotropic Meds/PRN Use	40	21.5%	22.3%
	F0641	Accuracy of Assessments	33	17.7%	18.4%
	F0759	Free of Medication Error Rts 5 Prcnt or More	26	14.0%	14.5%
	F0584	Safe/Clean/Comfortable/Homelike Environment	24	12.9%	13.4%
	F0757	Drug Regimen is Free from Unnecessary Drugs	22	11.8%	12.3%
	F0580	Notify of Changes (Injury/Decline/Room, etc.)	21	11.3%	11.7%
	F0609	Reporting of Alleged Violations	21	11.3%	11.7%
	F0695	Respiratory/Tracheostomy Care and Suctioning	21	11.3%	11.7%

Nebraska FY2024-Complaint Top 10 Citation Frequency Report

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Nebraska Active Providers=186		Total Number of Surveys=382
	F0689	Free of Accident Hazards/Supervision/Devices	44	20.4%	11.5%
	F0609	Reporting of Alleged Violations	29	15.6%	7.6%
	F0880	Infection Prevention & Control	24	11.3%	6.3%
	F0580	Notify of Changes (Injury/Decline/Room, etc.)	19	9.7%	5.0%
	F0684	Quality of Care	14	4.8%	3.7%
	F0760	Residents are Free of Significant Med Errors	14	5.9%	3.7%
	F0584	Safe/Clean/Comfortable/Homelike Environment	13	6.5%	3.4%
	F0812	Food Procurement, Store/Prepare/Serve Sanitary	12	6.5%	3.1%
	F0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	12	6.5%	3.1%
	F0677	ADL Care Provided for Dependent Residents	9	4.8%	2.4%
	F0759	Free of Medication Error Rts 5 Prcnt or More	9	4.8%	2.4%
	F0610	Investigate/Prevent/Correct Alleged Violation	9	4.3%	2.4%

**New York FY2024-Standard Top 10
Citation Frequency Report**

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			New York Active Providers=606		Total Number of Surveys=342
	F0812	Food Procurement, Store/Prepare/Serve Sanitary	134	21.9%	39.2%
	F0880	Infection Prevention & Control	125	20.6%	36.5%
	F0761	Label/Store Drugs and Biologicals	90	14.5%	26.3%
	F0689	Free of Accident Hazards/Supervision/Devices	88	14.4%	25.7%
	F0656	Develop/Implement Comprehensive Care Plan	85	13.9%	24.9%
	F0584	Safe/Clean/Comfortable/Homelike Environment	81	13.0%	23.7%
	F0677	ADL Care Provided for Dependent Residents	70	11.2%	20.5%
	F0684	Quality of Care	64	10.6%	18.7%
	F0550	Resident Rights/Exercise of Rights	61	10.1%	17.8%
	F0657	Care Plan Timing and Revision	50	8.3%	14.6%

**New York FY2024-Complaint Top 10
Citation Frequency Report**

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			New York Active Providers=606		Total Number of Surveys=1940
	F0609	Reporting of Alleged Violations	96	14.7%	4.9%
	F0689	Free of Accident Hazards/Supervision/Devices	89	14.5%	4.6%
	F0600	Free from Abuse and Neglect	63	9.6%	3.2%
	F0610	Investigate/Prevent/Correct Alleged Violation	63	10.4%	3.2%
	F0684	Quality of Care	50	7.9%	2.6%
	F0677	ADL Care Provided for Dependent Residents	45	7.4%	2.3%
	F0584	Safe/Clean/Comfortable/Homelike Environment	43	6.8%	2.2%
	F0656	Develop/Implement Comprehensive Care Plan	37	6.1%	1.9%
	F0657	Care Plan Timing and Revision	32	5.1%	1.6%
	F0725	Sufficient Nursing Staff	31	5.1%	1.6%

**Pennsylvania FY2024-Standard Top 10
Citation Frequency Report**

State	Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Pennsylvania Active Providers=671		Total Number of Surveys=751
	F0684	Quality of Care	314	44.0%	41.8%
	F0812	Food Procurement, Store/Prepare/Serve Sanitary	273	37.4%	36.4%
	F0880	Infection Prevention & Control	233	33.2%	31.0%
	F0656	Develop/Implement Comprehensive Care Plan	219	30.8%	29.2%
	F0761	Label/Store Drugs and Biologicals	210	29.7%	28.0%
	F0689	Free of Accident Hazards/Supervision/Devices	197	27.7%	26.2%
	F0641	Accuracy of Assessments	176	24.9%	23.4%
	F0695	Respiratory/Tracheostomy Care and Suctioning	153	21.9%	20.4%
	F0584	Safe/Clean/Comfortable/Homelike Environment	140	19.7%	18.6%
	F0657	Care Plan Timing and Revision	131	18.8%	17.4%

Pennsylvania FY2024-Complaint Top 10

Citation Frequency Report

State	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Tag #				
Totals represent the # of providers and surveys that meet the selection criteria specified above.		Pennsylvania Active Providers=671		Total Number of Surveys=3497
F0689	Free of Accident Hazards/Supervision/Devices	193	22.4%	5.5%
F0684	Quality of Care	175	21.5%	5.0%
F0584	Safe/Clean/Comfortable/Homelike Environment	125	14.5%	3.6%
F0600	Free from Abuse and Neglect	103	13.7%	2.9%
F0880	Infection Prevention & Control	73	10.0%	2.1%
F0812	Food Procurement, Store/Prepare/Serve Sanitary	70	8.3%	2.0%
F0755	Pharmacy Svcs/Procedures/Pharmacist/Records	69	8.3%	2.0%
F0677	ADL Care Provided for Dependent Residents	66	8.3%	1.9%
F0580	Notify of Changes (Injury/Decline/Room, etc.)	65	8.5%	1.9%
F0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	64	8.9%	1.8%
F0842	Resident Records - Identifiable Information	63	8.6%	1.8%
F0656	Develop/Implement Comprehensive Care Plan	62	8.8%	1.8%

Overdue Recertification Surveys Report (16 months) FY2024

Overdue Recertification Surveys Report

Region	Number of Late Surveys	% of Active Providers
(I) Boston	141	17.7%
(II) New York	317	33.2%
(III) Philadelphia	427	31.4%
(IV) Atlanta	913	34.3%
(V) Chicago	478	14.9%
(VI) Dallas	103	5.1%
(VII) Kansas City	192	13.9%
Iowa	11	2.7%
Kansas	98	32.2%
Missouri	83	16.9%
(VIII) Denver	68	11.9%
(IX) San Francisco	279	19.7%
(X) Seattle	40	9.5%
National Total	2,958	20.0%
New York	202	33.5%

NOTE: The states of Nebraska and Pennsylvania have no overdue surveys reported

Number of G+ Deficiencies FY2024
Deficiency Count Report

Region	Deficiencies by Scope & Severity											
	B	C	D	E	F	G	H	I	J	K	L	Total
(I) Boston	0	0	0	0	0	227	31	2	65	30	7	362
(II) New York	0	0	0	0	0	65	14	4	45	25	25	178
(III) Philadelphia	0	0	0	0	0	247	3	0	104	50	28	432
(IV) Atlanta	0	0	0	0	0	412	14	1	534	163	50	1,174
(V) Chicago	0	0	0	0	0	1,642	17	1	466	49	47	2,222
(VI) Dallas	0	0	0	0	0	259	51	1	653	380	43	1,387
(VII) Kansas City	0	0	0	0	0	401	6	3	274	51	23	758
Iowa	0	0	0	0	0	130	2	0	73	28	4	237
Kansas	0	0	0	0	0	87	0	3	96	10	11	207
Missouri	0	0	0	0	0	163	3	0	92	12	8	278
Nebraska	0	0	0	0	0	21	1	0	13	1	0	36
(VIII) Denver	0	0	0	0	0	276	8	0	43	20	5	352
(IX) San Francisco	0	0	0	0	0	421	11	0	105	37	23	597
(X) Seattle	0	0	0	0	0	229	3	2	43	10	5	292
National Total	0	0	0	0	0	4,179	158	14	2,332	815	256	7,754
New York	0	0	0	0	0	38	8	4	17	17	10	94
Pennsylvania	0	0	0	0	0	168	3	0	54	30	14	269

National G+ Citation Frequency FY2024 Top 10
Citation Frequency Report

National Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.		Active Providers=14946		Total Number of Surveys=5418
F0689	Free of Accident Hazards/Supervision/Devices	2,246	12.9%	41.5%
F0600	Free from Abuse and Neglect	1,136	6.8%	21.0%
F0684	Quality of Care	680	4.2%	12.6%
F0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	653	4.1%	12.1%
F0760	Residents are Free of Significant Med Errors	246	1.6%	4.5%
F0697	Pain Management	222	1.4%	4.1%
F0692	Nutrition/Hydration Status Maintenance	199	1.3%	3.7%
F0580	Notify of Changes (Injury/Decline/Room, etc.)	198	1.3%	3.7%
F0656	Develop/Implement Comprehensive Care Plan	162	1.0%	3.0%
F0678	Cardio-Pulmonary Resuscitation (CPR)	131	0.9%	2.4%

National J+ Citation Frequency FY2024 Top 10
Citation Frequency Report

National Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.		Active Providers=14946		Total Number of Surveys=2223
F0689	Free of Accident Hazards/Supervision/Devices	880	5.5%	39.6%
F0600	Free from Abuse and Neglect	524	3.3%	23.6%
F0684	Quality of Care	263	1.7%	11.8%
F0678	Cardio-Pulmonary Resuscitation (CPR)	125	0.8%	5.6%
F0580	Notify of Changes (Injury/Decline/Room, etc.)	124	0.8%	5.6%
F0760	Residents are Free of Significant Med Errors	114	0.7%	5.1%
F0835	Administration	111	0.7%	5.0%
F0686	Treatment/Svcs to Prevent/Heal Pressure Ulcer	104	0.7%	4.7%
F0880	Infection Prevention & Control	101	0.7%	4.5%
F0607	Develop/Implement Abuse/Neglect Policies	94	0.6%	4.2%

Civil Money Penalty (CMP) Report, FY2024

Civil Money Penalty (CMP) Report

Region	Total Number of CMPs		Total Dollar Amount		Average Dollar Amount		Average Days in Effect
	Per Diem	Per Instance	Per Diem	Per Instance	Per Diem	Per Instance	Per Diem
(I) Boston	191	153	\$ 10,526,569.78	\$ 1,997,225.55	\$ 55,112.93	\$ 13,053.76	28
(II) New York	240	32	\$ 9,835,486.09	\$ 371,971.16	\$ 40,981.19	\$ 11,624.10	23
(III) Philadelphia	244	139	\$ 14,273,875.27	\$ 1,726,597.91	\$ 58,499.49	\$ 12,421.57	45
(IV) Atlanta	572	519	\$ 25,293,007.05	\$ 4,953,706.50	\$ 44,218.54	\$ 9,544.71	21
(V) Chicago	880	336	\$ 48,825,429.29	\$ 5,057,563.67	\$ 55,483.44	\$ 15,052.27	32
(VI) Dallas	712	440	\$ 33,182,277.27	\$ 5,651,927.11	\$ 46,604.32	\$ 12,845.29	28
(VII) Kansas City	260	72	\$ 8,016,772.41	\$ 1,034,393.45	\$ 30,833.74	\$ 14,366.58	20
Iowa	70	33	\$ 2,696,577.44	\$ 455,550.61	\$ 38,522.53	\$ 13,804.56	31
Kansas	61	19	\$ 1,391,295.29	\$ 291,508.63	\$ 22,808.12	\$ 15,342.56	10
Missouri	103	11	\$ 3,312,274.74	\$ 140,011.12	\$ 32,158.01	\$ 12,728.28	19
Nebraska	26	9	\$ 616,624.94	\$ 147,323.09	\$ 23,716.34	\$ 16,369.23	17
(VIII) Denver	192	34	\$ 4,217,821.59	\$ 377,021.90	\$ 21,967.82	\$ 11,088.88	20
(IX) San Francisco	467	92	\$ 13,972,106.91	\$ 1,135,771.69	\$ 29,918.86	\$ 12,345.34	24
(X) Seattle	121	39	\$ 7,709,632.75	\$ 445,057.66	\$ 63,715.97	\$ 11,411.73	51
National Total	3,879	1,856	\$ 175,852,978.41	\$ 22,751,236.60	\$ 45,334.62	\$ 12,258.21	28
New York	139	17	\$ 4,771,932.33	\$ 184,732.23	\$ 34,330.45	\$ 10,866.60	23
Pennsylvania	141	70	\$ 8,635,972.62	\$ 766,056.51	\$ 61,248.03	\$ 10,943.66	42

If I can help you in any way, please feel free to contact me.

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The LICA-MedMan team of Linda, Carl & Steve wish you a blessed Christmas and a prosperous, fully-staffed, fully-funded, limited-regulatory 2025!

