

# NAVIGATING THE LICENSURE SURVEY PROCESS OF CRITICAL ACCESS HOSPITALS

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# REGULATIONS FOR CRITICAL ACCESS HOSPITALS

## Statute – Montana Code Annotated (MCA)

50-5-101. Definitions. As used in parts 1 through 3 of this chapter, unless the context clearly indicates otherwise, the following definitions apply:

(18) "Critical access hospital" means a facility that is located in a rural area, as defined in 42 U.S.C. 1395ww(d)(2)(D), and that has been designated by the department as a critical access hospital pursuant to [50-5-233](#).



## MCA Continued...

(26) (a) "Health care facility" or "facility" means all or a portion of an institution, building, or agency, private or public, excluding federal facilities, whether organized for profit or not, that is used, operated, or designed to provide health services, medical treatment, or nursing, rehabilitative, or preventive care to any individual. The term includes chemical dependency facilities, **critical access hospitals**, eating disorder centers, end-stage renal dialysis facilities, home health agencies, home infusion therapy agencies, hospices, hospitals, infirmaries, long-term care facilities, intermediate care facilities for the developmentally disabled, medical assistance facilities, mental health centers, outpatient centers for primary care, outpatient centers for surgical services, rehabilitation facilities, residential care facilities, and residential treatment facilities.

(b) The term does not include offices of private physicians, dentists, or other physical or mental health care workers regulated under Title 37, including licensed addiction counselors.

(59) "Swing bed" means a bed approved pursuant to 42 U.S.C. 1395tt to be used to provide either acute care or extended skilled nursing care to a patient.



# Statutory Authority

## Designation Of Critical Access Hospitals -- Adoption Of Rules

[https://leg.mt.gov/bills/mca/title\\_0500/chapter\\_0050/part\\_0020/section\\_0330/0500-0050-0020-0330.html](https://leg.mt.gov/bills/mca/title_0500/chapter_0050/part_0020/section_0330/0500-0050-0020-0330.html)

# License Requirements

50-5-201. License requirements. (1) A facility or licensee considering construction of or alteration or addition to a health care facility shall submit plans and specifications to the department for preliminary inspection and approval prior to commencing construction.

(2) A person may not operate a health care facility unless the facility is licensed by the department. Licenses may be issued for a period of 1 to 3 years in duration. A license is valid only for the person and premises for which it was issued. A license may not be sold, assigned, or transferred.

(3) Upon discontinuance of the operation or upon transfer of ownership of a facility, the license must be returned to the department.

(4) Licenses must be displayed in a conspicuous place near the admitting office of the facility.

[https://leg.mt.gov/bills/mca/title\\_0500/chapter\\_0050/part\\_0020/sections\\_index.html](https://leg.mt.gov/bills/mca/title_0500/chapter_0050/part_0020/sections_index.html)



# Issuance And Renewal Of Licenses -- Inspections

50-5-204. Issuance and renewal of licenses -- inspections. (1) After receipt of a new application and notice that the facility is ready to be inspected, the department or its authorized agent shall conduct an initial inspection of the facility within 45 days.

(2) After receipt of an application for renewal of a license, the department or its authorized agent shall inspect the facility without prior notice to the operator or staff.

(3) If the department determines that the facility meets minimum standards and the proposed or existing staff is qualified, the department shall issue a license for a period of 1 to 3 years in duration.

(4) If minimum standards are not met, the department may issue a provisional license for less than 1 year if operation will not result in undue hazard to patients or residents or if the demand for accommodations offered is not met in the community.

(6) The department may inspect a licensed health care facility whenever it considers it necessary. The entire premises of a licensed facility must be open to inspection, and access to all records must be granted at all reasonable times.

# Facility Inspections

50-5-116. Facility inspections. (1) In addition to its licensure inspections, as provided by [50-5-204](#), the department may inspect any facility for compliance with part 1 or 2 of this chapter or for compliance with a rule, license provision, or order adopted or issued pursuant to part 1 or 2.

(2) An authorized representative of the department may inspect a facility and associated property without prior notice to the owner or staff of the facility whenever the department considers it necessary. The authorized representative must be given access to all records and an opportunity to copy the records.

## Prohibited Activities

50-5-111. Prohibited activities. It is unlawful to:

- (1) operate a facility without a license;
- (2) prevent, interfere with, or impede department investigation, department enforcement, department examination of relevant books and records, or activities of the department concerning the preservation of evidence; or
- (3) violate any provision of part 1 or 2 of this chapter or violate a rule, license provision, or order adopted or issued pursuant to part 1 or 2.

History: En. Sec. 1, Ch. 415, L. 1993.

## Denial, Suspension, Or Revocation Of Health Care Facility License -- Provisional License

[https://leg.mt.gov/bills/mca/title\\_0500/chapter\\_0050/part\\_0020/section\\_0070/0500-0050-0020-0070.html](https://leg.mt.gov/bills/mca/title_0500/chapter_0050/part_0020/section_0070/0500-0050-0020-0070.html)

# Administrative Rules of Montana (ARM)



## Minimum Standards for All Health Care Facilities

**ARM 37.106.301 – 37.106.331**

<http://mtrules.org/gateway/Subchapterhome.asp?scn=37%2E106.3>

## ARM 37.106.301 – 37.106.331

- ▶ Construction
- ▶ Infection Control
- ▶ Employee Files
- ▶ Medical Records
- ▶ Food service
- ▶ Physical Plant
- ▶ Maintenance
- ▶ Laundry
- ▶ Disaster Plan
- ▶ Policy and Procedure

## ARM 37.106.704-MINIMUM STANDARDS FOR A CRITICAL ACCESS HOSPITAL (CAH)

(1) A critical access hospital must comply with the conditions of participation for critical access hospitals under 42 CFR 485 Subpart F, updated through May 2005. The department adopts and incorporates by reference 42 CFR 485 Subpart F, updated through May 2005. A copy of the cited requirements is available from the Department of Public Health and Human Services, Quality Assurance Division, 2401 Colonial Drive, P.O. Box 202953, Helena, MT 59620-2953.



# Code of Federal Regulations (CFR)



## 42 CFR 485 Subpart F

Critical Access Hospitals (CAHs) are required to be in compliance with the Federal requirements set forth in the Medicare Conditions of Participation (CoP) in order to receive Medicare/Medicaid payment. The goal of a CAH survey is to determine if the CAH is in compliance with the CoP set forth at 42 CFR Part 485 Subpart F.

- ▶ CAH's performance of organizational and patient-focused functions and processes.
- ▶ Assess compliance with Federal health, safety, and quality standards
- ▶ Assure that patients receives safe, quality care and services.

# Survey/ Inspection



## The survey process begins...

- ▶ Entrance Interview
  - What to expect
  - Documentation Needed
  - Discuss changes to facility since last inspection
  - Review organizational chart

## Facility tour

**General layout of facility**

**Size of facility**

**Staff introductions**

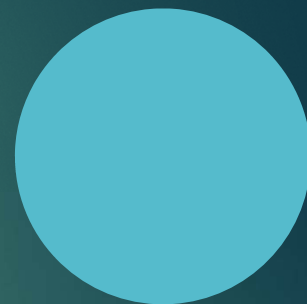
**Services offered**

**Population served**



## Observations

- ▶ Potential hazards
- ▶ Infection control
- ▶ Staff interactions with patients



## Patient chart review

- ▶ Required components
- ▶ Does the record tell a complete story from admission to discharge?

## Employee file review

Employee name  
Job description signed by the employee  
Documentation of orientation signed by employee  
Copy of current credentials, certification, or license  
Background check - §483.13(c)  
Education/experience - §485.608 (d)  
Employee evaluation\*



# Additional Indications of Compliance

- ▶ Quality Assurance
- ▶ Governing Body minutes
- ▶ Incident reporting
- ▶ Policies and Procedures
- ▶ By-laws
- ▶ Personnel forms
- ▶ Logs
- ▶ Budgets



# Exit Conference



# Exit Conference



- ▶ Attendance is determined by facility
- ▶ Review of the process
- ▶ Positive feedback
- ▶ Areas of concern
- ▶ Review of deficiencies
- ▶ Moving forward

# Statements of Deficiency (SODs)



- ▶ Accompanied by a letter explaining timeframes and expectations
- ▶ Regulation
- ▶ Evidence used
- ▶ Explanation of deficiency
- ▶ Staff identification list
- ▶ Patient identification list

# Plan of Correction

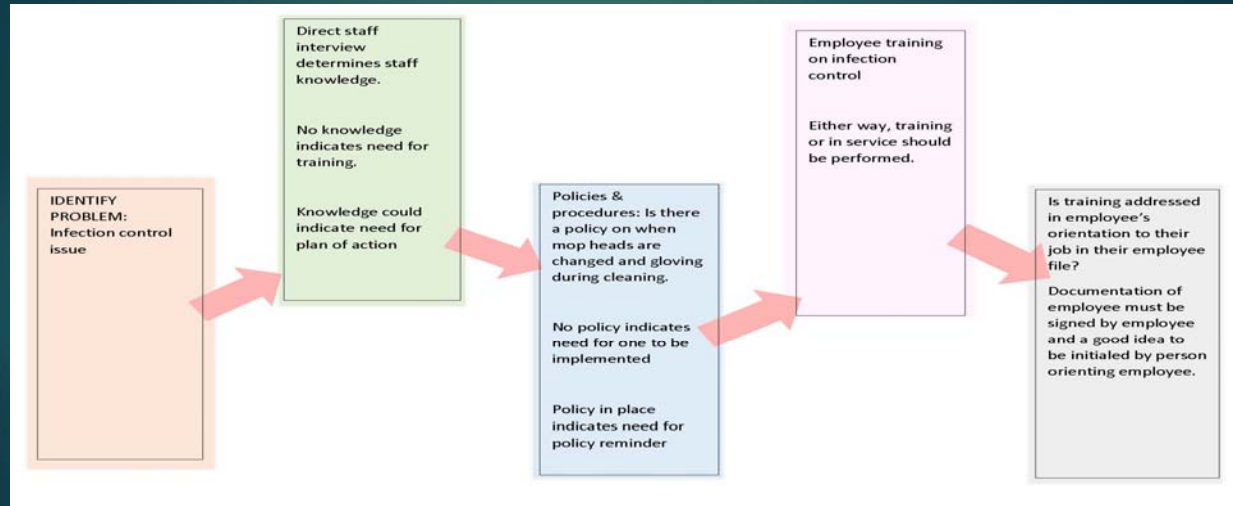
- ▶ Due within 10 working days
- ▶ Must address:
  - Actual deficiency and how it will be corrected
  - Timeframe for correction (reasonable)
  - Plan to prevent recurrence

\*Please contact Licensure if you have questions about a deficiency or potential correction.

## Scenario #1

**Facility Tour:** During the tour, the surveyor observes housekeeping staff cleaning rooms. Observes staff moving from one room to the next without changing gloves or mop heads.

## Scenario #1

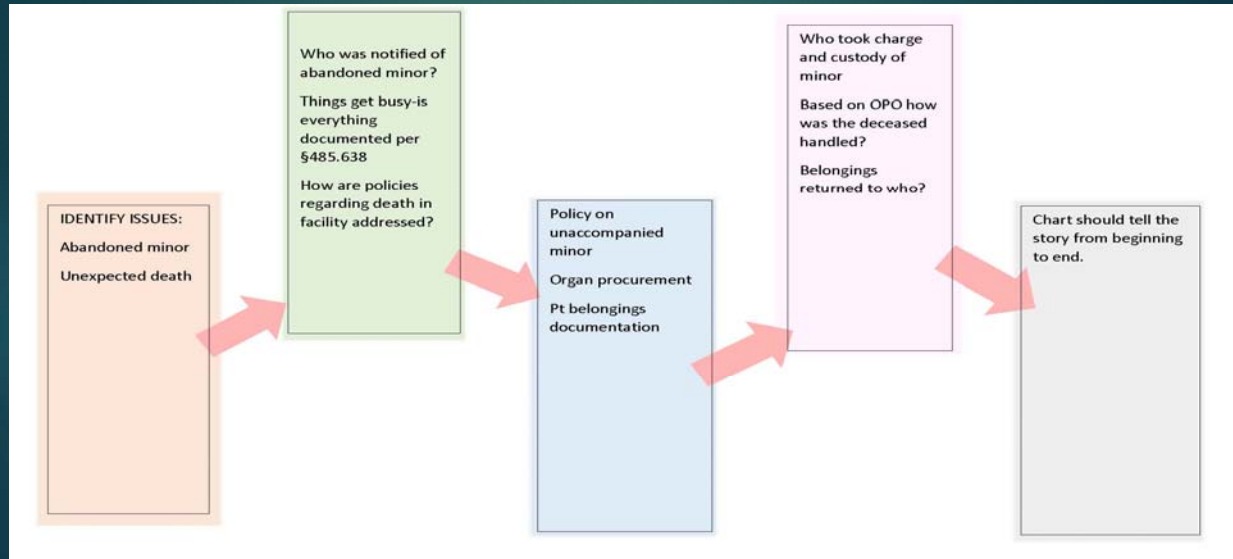


## Scenario #2

**Patient Chart Review:** Ms. Smith and her four year old son are brought to your facility via ambulance after involvement in a motor vehicle accident. The child suffered no injuries. Ms. Smith has multiple fractures, shortness of breath and soon after she arrives in your emergency department she loses consciousness and goes into full arrest. Though every attempt is made to save her, Ms. Smith is pronounced dead by your physician.



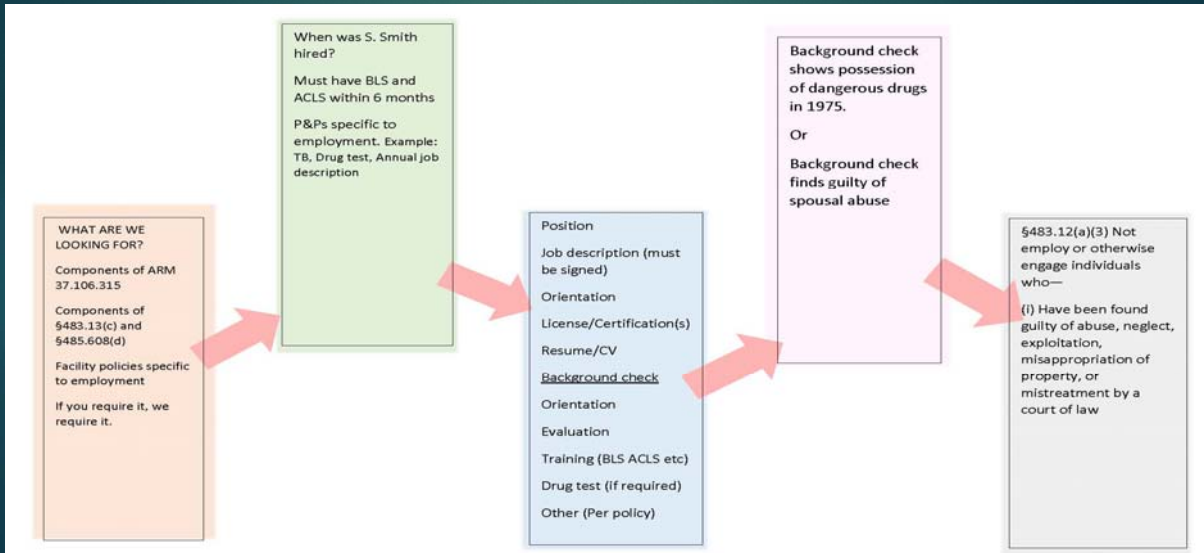
## Scenario #2



## Scenario #3

**Employee File Review:** You interview and offer Susie Smith, RN a job at your facility. When creating her employee file you want to make sure its complete.

# Scenario #3



## EMPLOYEE FILE REVIEW ARM 37.106.315

Employee Name			
Position			
License/Certification			
Background check §483.13(c)			
Education/Experience §485.608(d)			
Signed Job Description			
Orientation Documentation			
Evaluations*			
Training- BLS, ACLS, PALS, etc.			
TB evaluation			
Drug test (if required)			
Other (per policy)			

