

CMS REMEDIES MATRIX

Immediate jeopardy to Resident Health or Safety	<u>J</u> PoC Required Cat. 3 (must impose temporary management and/or termination, CMP is optional). Optional: Cat. 1 Optional: Cat. 2	<u>K</u> PoC Required Cat. 3 (must impose temporary management and/or termination, CMP is optional). Optional: Cat. 1 Optional: Cat. 2	<u>L</u> PoC Required Cat. 3 must impose temporary management and/or termination, CMP is optional). Optional: Cat. 1 Optional: Cat. 2
Actual Harm that is not Immediate Jeopardy	<u>G</u> PoC Required: Cat. 2 Optional: Cat. 1	<u>H</u> PoC Required: Cat. 2 Optional: Cat. 1	<u>I</u> PoC Required: Cat. 2 Optional: Cat. 1 Optional: Temporary Management
No Actual Harm With Potential for More than Minimal Harm that is not Immediate Jeopardy	<u>D</u> PoC Required: Cat. 1 Optional: Cat. 2	<u>E</u> PoC Required: Cat. 1 Optional: Cat. 2	<u>F</u> PoC Required: Cat. 2 Optional: Cat. 1
No Actual Harm with Potential for Minimal Harm	<u>A</u> No PoC Not on CMS-2567	<u>B</u> PoC	<u>C</u> PoC
	Isolated	Pattern	Widespread

Substandard quality of care: any deficiency in § 483.13 Resident Behavior and Facility Practices, § 483.15 Quality of Life, or in § 483.25 Quality of Care that constitutes: Immediate jeopardy to resident health or safety; or, a pattern of, or widespread actual harm that is not immediate jeopardy; or, a widespread potential for more than minimal harm that is not immediate jeopardy, with no actual harm.

Deemed to be in substantial compliance

REMEDY CATEGORIES

Category 1 (Cat. 1)

Directed Plan of Correction
State Monitor; and/or
Directed In-Service Training

Category 2 (Cat. 2)

Denial of Payment for New Admissions;
Denial of Payment for All Individuals (imposed by CMS only); and/or
Civil Money Penalties:
\$50 - \$3,000/day

Category 3 (Cat. 3)

Temporary Management
Termination
Civil Money Penalties
\$3,050 - \$10,000/day

NOTE:

1. Denial of Payment for New Admissions must be imposed when a facility is not in substantial compliance within 3 months after being found out of compliance.
2. Denial of Payment and State Monitoring must be imposed when a facility has been found to have provided substandard quality of care on three consecutive standard surveys. Only HCFA may impose denial of all payments.
3. Termination may be imposed by the State or CMS at any time when appropriate.