### Overview

Nursing homes are licensed and inspected in accordance with Florida Statutes Chapter 400 and with rules promulgated under the provisions of those statutes governing minimum standards. Certified nursing homes are required to be in compliance with federal requirements in 42 CFR Part 483, Subpart B.

Agency survey staff are responsible for conducting both state licensure and federal certification surveys. The purpose of this protocol is to require noncompliance be recorded on separate printed documents when the licensure and certification surveys are performed concurrently.

### Background

Federal Survey findings are printed on the Centers for Medicare and Medicaid Services (CMS) Statement of Deficiencies, Form 2567. State Survey findings are printed on a state form. Noncompliance with state statutes and rules are generally recorded using a cross-reference notation on the federal form. In general, federal regulations do not specifically mirror state regulations.

The *Principles of Documentation*, a federal publication, guides survey staff to document noncompliance in terms specific enough to allow a *reasonably knowledgeable* person to understand the aspects of the requirement not met. Certified facilities may dispute deficiencies through the Informal Dispute Resolution (IDR) process, or through appeal to the United States Department of Health and Human Services.

Findings of fact, in accordance with Florida Statutes, Chapter 120, the Administrative Procedures Act, are based upon a preponderance of the evidence. Deficiencies challenged through the State’s administrative review have traditionally required involved parties to present, defend, and/or evaluate violations of federal regulations documented according to federal guidelines. The results of state licensure hearings do not modify the federal Statement of Deficiencies.

### Survey Staff Responsibilities

When performing both the federal and state surveys concurrently, refer to the current *State and Federal Regulation Reference* for guidance regarding corresponding regulations or those which should be considered based upon a determination of non-compliance with a particular regulation. Documentation of noncompliance with state rules and/or regulations must be recorded on state forms (AHCA). Violations of federal requirements must be documented on the Form 2567, CMS Statement of Deficiencies.

*Cover the Statements of Deficiencies with a comprehensive letter that addresses specific instructions for the state as well as federal forms. Advise the provider to document corrective action(s) directly adjacent to each deficient practice, if any, identified on the respective forms.*
# Protocol for Performing Nursing Home Licensure & Certification Surveys Concurrently

**Using ASPEN Survey Staff Responsibilities**

ASPEN default prints federal findings on the CMS 2567, Statement of Deficient Practice, and state findings on the state form. The same Event ID number will print in the footer of each of the forms. Do not select *combine* at the *Customize Survey Report Form* window, which will override the default.

**Federal Deficiencies**
Summarize the federal survey at Tag 0000, Initial Comments. Record deficient practice at the appropriate F-Tag(s), or federal regulation, without reference to the state regulations.

**State Deficiencies**
Summarize the state survey at Tag 0000, Initial Comments. Record deficient practice at the appropriate N-Tag(s), or state licensure regulation, without reference to the federal regulations.

**FRAES Data Input Field Office Staff**
Enter federal citations in “Federal AO Inspection Data” and state citations in “State AO Inspection Data.”

**Effective**
July 1, 2005

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Polly Weaver, Chief, Field Operations

Date