STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Home and Community Living Administration
P.O. Box 45600 • Olympia, Washington 98504

October 2, 2025
Amended October 31, 2025
Amended December 17, 2025

HCLA: NH #2025-049
HCLA: ICF/IID# 2025-015
HCLA:AFH #2025-044
HCLA: ALF #2025-043
HCLA: ESF# 2025-30
HCLA: CCRSS #2025-024
***Amended* Impacts From Federal Government Shut Down**

Dear Provider/Administrator

The intent of this amended communication is to relay Residential Care Services plan of operation now that the Federal Government Shutdown is lifted. The Centers of Medicare and Medicaid (CMS) informed state agencies today, the federal nursing home surveys, revisits, and investigations of medium and low-level harm complaints and facility-reported incidents are no longer paused.

RCS will resume unannounced federal certification/state licensure surveys, investigations, and revisits activities as normal. Work in Medicaid only facilities (ICF/IID Facilities and Nursing Facilities) will continue as normal. Enforcement actions will continue as normal. Investigations started during the shutdown will be completed, including any associated federal and state enforcement. The iQIES system remains available for use so providers will receive all Statements of Deficiencies (SODs) via ePOC and can return any Plan of Correction (POC) via ePOC.

The federal continuing resolution is passed through January 2026. As of November 24, 2025, CMS has provided updated information that can be found using the following link QSO-26-02-ALL Questions and Answers for State Recovery after the Federal Government Shutdown

- *If a state licensure recertification or lower-level complaint was investigated under state licensure, it will have to be reviewed federally because licensure requirements vary by state. Those that were part of Excepted activities, the tags for those citations can be written as federal deficiencies.*

- *States should have issued all federal surveys where the CMS 2567 has been held due to the shutdown by 12/12/25. States may adjust the exit date of the compliance in the system to either the date of issuance of the CMS-2567 or findings of past non-compliance that were held.*
- *Deficiencies identified during surveys conducted during government shutdown will be considered federal citations if they are for non-compliance with federal requirements.*
- *If a facility submitted an appropriate Medicare application, met all requirements by the State Agency and Medicare Administrative Contractor as of the survey completion date, then the Medicare certification date could be retroactive to the date that CMS requirements were found to be met.*
- *A State may continue with a survey that was held open due to the shutdown.*
- *The enforcement cycle begins with the survey exit date with the exception of civil monetary penalties and State monitoring the effective dates of imposed sanctions may not be earlier than the date permitted by any application advice notice requirement.*
- *Federal complaint investigations under the authority of the state licensure during the shutdown will be managed in the following:*
    - *Allegations investigated **with no citation issued**- The state will confirm at the next federal complaint or standard survey that the allegation remains unsubstantiated and close the complaint as of the date of the federal survey. It is not necessary to repeat the entirety of the previous state licensure survey process. The surveyors should perform whatever review they believe necessary to affirm the earlier determination of compliance*
    - *Allegations investigated **with non-compliance identified**-The state will determine at the next federal complaint or standard survey if the facility remains non-compliant at the federal level. If so, the federal findings should be documented on a CMS-2567 with appropriate notification to the facility and enforcement beginning on the date of the federal survey. If the facility is determined to **be in compliance** during this survey, the state should federally close out the complaint as of the federal survey date.*

Thank you for your continued commitment to client health and safety. If you have any questions, please contact RCSPolicy@dshs.wa.gov.

October 1, 2025, the Centers for Medicare and Medicaid Services (CMS) gave the directive that all state survey and certification agencies had to halt all federal survey work and Residential Care Services (RCS) was to wrap up work we had started prior to 10-1-25, within 4 hours. RCS staff will need to come back and finish these federal surveys once the shutdown ends. Currently federal surveys are paused.

RCS has state licensing regulations that require us to inspect facilities every 15.99 months. Typically, we conduct our licensing visits with the federal survey. We will temporarily pause doing the license visits and wait for federal surveys to start again. If we were to conduct them now, RCS would have to go back in again and conduct the federal survey later which means 2 visits RCS staff must do, and 2 visits disrupting the daily routine of residents and provider staff. We will revisit this decision if the shutdown continues beyond 30 days. At that point we may need to start doing our licensing visits, so we do not get behind in the state requirement and to ensure we are still visiting homes and monitoring care and services.

All tasks in community programs (ALF, ESF, AFH, CCRSS) will continue as usual and uninterrupted. Our work in these programs is not funded through federal dollars.
Work in Medicaid only facilities (ICF/IID Facilities and Nursing Facilities) will continue as usual through the first quarter of the fiscal year.

On October 21, 2025, CMS provided updated guidance indicating revisits necessary to prevent mandatory denial of payment for new admissions (MDPNA) will be allowed within 15 days of imposition of the enforcement. RCS will need to request approval from CMS prior to the revisit.

As of October 31, 2025, CMS has updated their guidance stating revisit surveys may be approved by exception and necessary to prevent termination or prevent a statutorily mandated (three-month) denial of payment for new admissions. If a discretionary denial of payment for new admission (NPNA) has been in effect and the revisit meets the same timeframe as allowed for a mandatory DPNA.

CMS has directed us to only conduct investigations for Immediate Jeopardy (IJ) and harm level complaints for NH during the federal shutdown. However, RCW requires us to investigate any complaint received. RCS will continue investigating all complaints but will only cite IJ and harm citation(s) at the federal level (F Tags). All other citations will need to be cited through the state regulatory process.

Enforcement actions will continue during this time. Enforcement for IJ and Harm level citations will be coordinated with CMS. All other citations will be enforced using state enforcement remedies. The iQIES system remains available for use so providers will receive all Statements of Deficiencies (SODs) via ePOC and can return any Plan of Correction (POC) via ePOC.

CRU is still accepting complaints for all settings during the shutdown and CMS has a small crew still working on critical issues. If you wish to review the updated guidance issued by CMS click the link for QSO-026-01-All REVISED

Sincerely,

Miriam Mina, Acting Director
Residential Care Services

DSHS: *"Partnering with People"*