

## Overview

The Omnibus Budget Reconciliation Act (OBRA) of 1987 was signed into law by President Ronald Reagan and set forth new provisions for Medicare and Medicaid sections related to new standards for care in the nursing home setting. One major provision of OBRA is regarding the use of nurse aides. In addition to nurse aide training requirements, the act specifies that each state must have a registry for nurse aides.

The purpose of the nurse aide registry is to maintain a database of individuals who meet the federal requirements to provide caregiving to residents of skilled nursing facilities. The registry also informs nursing home staff, through an inquiry process, of persons who are ineligible to work in a skilled nursing home due to findings of abuse, neglect, or misappropriation of property.

The provisions of OBRA apply to skilled nursing facilities certified through the Centers for Medicare and Medicaid Services (CMS) to receive Medicaid or Medicare funding.

The following Revised Code of Washington (RCW) Chapters, Code of Federal Regulations (CFR), and Washington Administrative Codes (WAC) authorizes Residential Care Services (RCS) to establish and maintain a nurse aide registry, and to investigate reports of abuse, neglect, or misappropriation of property in the nursing home setting, as well as establishing training and competency requirements for nurse aides:

- A. [42 CFR §483.35 NURSING SERVICES](#)
- B. [42 CFR §483.150 THROUGH §483.158](#)
- C. [CHAPTER 18.51 RCW NURSING HOMES](#)
- D. [CHAPTER 18.88A RCW NURSING ASSISTANTS](#)
- E. [CHAPTER 74.34 RCW ABUSE OF VULNERABLE ADULTS](#)
- F. [CHAPTER 74.42 RCW NURSING HOMES – RESIDENT CARE, OPERATING STANDARDS](#)
- G. [CHAPTER 246-841 WAC NURSING ASSISTANTS](#)
- H. [CHAPTER 246-842 WAC NURSING ASSISTANTS – NURSING HOMES – NURSING ASSISTANTS TRAINING PROGRAM](#)
- I. [CHAPTER 388-97 WAC NURSING HOMES](#)

Residential Care Services collaborates with the following state and federal agencies in developing and maintaining the OBRA Registry program:

- The Centers for Medicaid and Medicare Services
- Washington State Department of Health

These procedures are not covered by [DSHS Administrative Policies](#) as they are specific to Residential Care Services. These procedures will be reviewed for accuracy and compliance at least every 5 years.

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## Contacts

- Nursing Assistant Training Competency and Evaluation Program/OBRA Registry Unit General Contact, [OBRARegistry@dshs.wa.gov](mailto:OBRARegistry@dshs.wa.gov)
- RCS Policy Unit General Contact, [RCSPolicy@dshs.wa.gov](mailto:RCSPolicy@dshs.wa.gov)
- RCS Quality Improvement Unit General Contact, [ImproveRCS@dshs.wa.gov](mailto:ImproveRCS@dshs.wa.gov)

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# Part I: Nursing Assistant Training and Competency Evaluation Program (NATCEP)

## A. General Guidelines

### Training

The NATCEP Manager ensures skilled nursing facilities (SNF)/homes follow the federal regulations regarding nursing assistant training programs in their facility.

This is done by:

1. Survey Teams will:
  - a. Complete the [OBRA NA Training On-Site Inspection Form for Survey \(NATCEP\) \(DSHS 16-168\)](#) form to ensure federal regulations are being met.
  - b. May contact NATCEP manager for further directions.
  - c. E-mail the completed form to the NATCEP manager at [OBRARegistry@dshs.wa.gov](mailto:OBRARegistry@dshs.wa.gov).
2. NATCEP Manager reviews the form to ensure federal requirements are being met.
  - a. If they are not being met, calls and addresses issues with the training program and follows up by e-mail, if needed.
  - b. If they are being met, electronically files form.
3. Each State is responsible for ensuring that the nurse aide training programs offered in their State meet minimum Federal requirements. Federal law also prescribes specific areas that must be included in all State-approved nurse aide training programs (training) and competency evaluation programs (testing).
  - a. For NATCEPs, determine whether the requirements of [42 § 483.152](#) are met.
  - b. Training programs must have a minimum of 75 hours which includes 16 hours of supervised clinical training.
  - c. The curriculum must include all the areas listed in [42 § 483.152\(b\)](#)
  - d. Students do not perform any services for which they have not trained and been found proficient by the instructor; and
  - e. Students providing services to residents are under the general supervision of a licensed practical nurse (LPN) or a registered nurse (RN).

### Testing

The NATCEP Manager ensures State testing is meeting federal requirements listed in CFR.

1. Participates in meetings with DOH regarding NA training and testing.
2. Attends weekly calls with testing vendor (currently Credentia) and DOH.
3. For Competency Evaluation Programs, determine whether the requirements of [42 § 483.154](#) are met.
  - a. Offer written or oral testing.
  - b. Address each course requirement specified in [42 § 483.152\(b\)](#).

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- c. Be developed from a pool of test questions.
- d. Skills must be randomly selected from a pool consisting of tasks generally performed by nurse aides and must include the personal care skills and interpersonal relationship skills listed in [§483.152\(b\)\(3\)](#).
- e. Students can take both tests up to four (4) times. After four (4) times if they are still unsuccessful, they must retrain and retest.
- f. Students who are employed by a nursing facilities/home or have an offer of employment cannot be charged for the training or testing process.
- g. When students successfully pass both the written or oral and skills test, they are placed on the OBRA registry.

### [Nursing Care Quality Assurance Commission \(NCQAC\)](#)

Attend six (6) meetings per year as the DSHS representative to ensure that any State rules/guidelines/laws are in line with federal regulations.

### [Mock Testing](#)

Nursing programs can contact the NATCEP Manager for mock testing (done at the program location) for NAC candidates who have completed their training but have not yet tested. This helps reduce anxiety by allowing them to experience a testing environment and to ask questions regarding their concerns about testing. Students perform selected skills and are evaluated by the NATCEP Manager.

### [OBRA Oversight](#)

The NATCEP Manager ensures:

1. OBRA Inquiry forms are processed within three (3) working (business) days of receipt.
2. Interstate Endorsement forms are processed within three (3) working days of receipt.
3. Endorsement List from the DOH is added to the OBRA Registry within three (3) working days of receipt.
4. Interstate endorsements (reciprocity) are completed within three (3) working days of receipt.
5. Incorrect OBRA records are corrected/updated.
6. Results (State exam scores) from testing vendor are uploaded appropriately.
7. Training of new staff on OBRA Registry in STARS.
8. Monitor Registry for quality assurance purposes.

### [Instructor Workshops](#)

Hold three (3) or more workshops per year for instructors and program directors of nursing assistant programs at various locations throughout the state.

These workshops cover:

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1. Review of nursing assistant skills.
2. Review/share teaching techniques.
3. Updates in curriculum or processes from testing vendor or DOH.

## B. Sanction Letters

### Background

A facility cannot have a NATCEP if the facility:

- Has been subject to extended or partial extended survey as result of a finding of substandard quality of care (SQC); OR
- Has been assessed a Civil Money Penalty (CMP) of more than \$11,995.00 (current monetary threshold);
- Has been subject to a denial of payment;
- Has a temporary manager appointed;
- Has been terminated from participation; and/or
- Has been closed and/or residents transferred to other facilities

### Procedure

When, after the most current survey shows that that one of the above has occurred, CMS sends notification to the facility regarding the CMP and any citations being imposed upon them.

Typically triggered by a CMP exceeding the current monetary threshold, NATCEP sends a withdrawal of approval for the facility's nurse aide training program (standard letter originally written by an Assistant Attorney General). This is called a NATCEP sanction letter.

Sixty days (appeal period) after CMS notification to the facility is when the NATCEP sanction letter is sent to the facility. NATCEP does not receive notice of the CMS action. NATCEP checks ASPEN on a regular basis for these notices. CMS often does not meet the 60-day requirement for sending their notification, so the NATCEP sanction letter may be delayed.

NATCEP writes the sanction letter to the facility using information in the CMS notification:

- CMS certification number
- Survey cycle start date
- The citation(s) and scope and severity of them
- CMP amount

Once completed, the letter is e-faxed to the facility administrator, and the letter and e-fax confirmation are saved to the Q: drive.

Two (2) to three (3) days later, NATCEP notifies the people on the cc: list of the sanction letter (varies)

- DOH
- Credentia
- Regional Administrator (RA)



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- Field Manager (FM)
- Regional Ombudsman
- Compliance Unit
- Cost Reimbursement
- Central Files/Perceptive Content (PC)

## C. [Waivers](#)

### Background

After a sanction letter is received, a facility can request a waiver to have an outside NATCEP program provide nursing assistant clinical training in their facility (but not involving their facility's staff).

### Procedure

When the facility requests a waiver, the waiver process must be completed within 90 days of receiving of the request.

NATCEP reviews citations and any recent surveys to determine whether CMS would likely approve a waiver.

1. **If so**, NATCEP:

- a. Sets up a site visit (virtual or in person)
- b. Sends CMS a one-page summary of:
  - i. Facility name and address.
  - ii. Facility's CMS Number.
  - iii. Condensed version of citations received, including scope and severity.
  - iv. The CMP amount.
  - v. Statement about site visit, including:
    - Who was spoken to; and
    - Findings of tour of facility.
  - vi. Recommendation/Support of waiver.

2. **If not**, NATCEP contacts the facility by phone and indicates NATCEP does not support or cannot recommend a waiver for the facility and suggests no letter be sent.

**Note:** Citations related to SQC are not eligible for waiver.

CMS then makes the final decision to approve or deny the waiver based on NATCEP recommendations and supporting evidence. CMS then notifies NATCEP of their decision.

NATCEP sends the notification of CMS's decision to the facility and files the decision in NATCEP shared drive. Facilities may also request a waiver of a NATCEP/CEP loss, based on a CMP, if the amount imposed is at least \$11,995.00 and was not related to quality of care furnished to residents. See ['Waiver and Appeal Authorities for Disapproval or Loss of NATCEP/CEP Programs'](#) for more information.

## Part II: [OBRA Registry](#)

### A. [Maintaining Registry Content](#)

#### Background

Federal rules at [42 CFR §483.156](#) specify the information the OBRA registry must contain for each individual who has successfully completed a nurse aide training and competency evaluation program (NATCEP) and found by the State to be competent to function as a nurse aide or who may function as a nurse aide because of meeting criteria in [42 CFR §483.150](#). The information includes:

1. The individual's full name;
2. Information necessary to identify each individual;
3. The date the individual became eligible for placement in the registry through successfully completing a nurse aide training and competency evaluation program or competency evaluation program, or by meeting the requirements of [42 CFR §483.150](#); and
4. The following information on any finding by the State survey agency of abuse, neglect, or misappropriation of property by the individual:
  - a. Documentation of the State's investigation, including the nature of the allegation and the evidence that led the State to conclude that the allegation was valid;
  - b. The date of the hearing, if the individual chose to have one, and its outcome; and
  - c. A statement by the individual disputing the allegation, if he or she chooses to make one; and
  - d. This information must be included in the registry within 10 working days of the finding and must remain in the registry permanently, unless the finding was made in error, the individual was found not guilty in a court of law, or the State is notified of the individual's death.

Only the State survey and certification agency may place on the registry findings of abuse, neglect, or misappropriation of property.

The state must determine which individuals are ineligible to work because they have performed no nursing or nursing-related services for a period of 24 consecutive months for monetary compensation, unless the individual's registry entry includes documented findings of abuse, neglect, or misappropriation of property.

This section contains the procedures that OBRA Registry program staff are required to follow to create and maintain registry content.

## [Registry Content Requirements](#)

### Background

As the state nursing home survey and certification agency, RCS is responsible to create and maintain OBRA registry content. Management of the program is the responsibility of the NATCEP Manager.

### Procedure

#### DESIGNATED STATUS.

Individuals on the registry are designated as either active, expired, or ineligible by OBRA staff.

1. **Active** means the individual has successfully completed a training and competency program meeting federal requirements as described in the section labelled '[Maintaining Registry Content.](#)' The individual must have worked in a nursing or nursing related capacity for compensation within the past 24 months. To have active status, the individual must not have actions or findings that render them ineligible (see b). The person with active status is eligible to work as a nurse aide in the nursing home setting.
2. **Ineligible** means there is a state disciplinary action or finding of abuse, neglect, or misappropriation of property in Washington State or another state. The individual with ineligible status is not eligible to work in the nursing home setting unless reassigned by a state nursing home survey and certification agency as eligible based on the finding or action being overturned.
3. **Expired** means the individual has not performed nursing or nursing-related services for a period of 24 consecutive months for monetary compensation. If no work history in the past 24 months is established, the individual with expired status is not eligible to work in the nursing home setting, unless or until, they successfully re-train and re-test, or re-test. If they successfully re-test, the expired status returns to active status.
  - a. Individuals with ineligible status (see b) who have not performed nursing or nursing related services for a period of 24 consecutive months will not be designated as expired. Those individuals will continue to be designated as ineligible.

### [Adding a Nurse Aide to the Registry](#)

#### Background

A NA is added to the registry through one of two (2) methods:

1. A NA who successfully completed testing and competency requirements through an approved program in Washington State may be added when the testing vendor attests the NA has met all competency requirements; or
2. A NA who successfully completed testing and competency requirements in another state may be added to the registry after the Washington State OBRA registry program receives endorsement information from the Department of Health (DOH).

#### Procedure

1. Adding NAs to the OBRA Registry after successful completion of training and competency requirements.
  - a. Once a nurse aide candidate passes the skills and written tests, the testing vendor provides OBRA Registry staff with test results through an electronic download. This download also provides the needed identifying information about the individual.
  - b. Test score transfers: The testing vendor notifies the OBRA Registry staff new testing scores are ready to be uploaded.
    - i. OBRA Registry staff receive test results from the testing vendor on a secure file transfer (File Zilla) one to two days following testing.
    - ii. OBRA Registry staff transfer new test score results to the STARS database.
    - iii. Transferred files are then uploaded into the registry in the STARS database.
2. Adding NAs who trained and tested out-of-state to the registry (also known as adding to the registry through endorsement)
  - a. Once a week, DOH sends the OBRA Registry program a list of people who received their nurse aide certification from another state, but want to work in Washington State as a NA.
  - b. OBRA staff must add the names supplied by DOH to the STARS database within one working day of receiving the list from DOH. To add an out-of-state NA to STARS:
    - i. Search for the NA by name or social security number (SSN) in STARS.
    - ii. If the person's name and SSN is found, skip to step "iv", and complete the steps to add the person to the OBRA Registry.
    - iii. If the name is not found, select "add a person," which will open a blank demographics page.
    - iv. Fill in the NA's name, date of birth (DOB), and SSN.
    - v. Select "add OBRA Registry."
    - vi. For registry origin, choose "endorsement."
    - vii. Choose the state that provided the endorsement.
    - viii. To determine the expiration date, add two (2) years to the last day the individual worked as a NA, and insert that date into the "expiration date" box.

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- If the expiration date (the date the person last worked as a NA plus two (2) years) is a past date, STARS will reflect the OBRA registry status as “expired.”
  - Add a comment in the note section that the NA status was expired at the time the person was added to the registry.
- ix. Select the “Save person” button, in the upper left corner.

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### [Adding or Removing a Finding to a Nurse Aide on the OBRA Registry – Under Construction](#)

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### [Verifying Re-Training/Testing or Re-Testing of a Nurse Aide with an Expired OBRA Registry Status](#)

#### Background

According to [42 CFR §483.35\(d\)\(6\)](#), if, since an individual's most recent completion of a training and competency evaluation program, there has been a continuous period of 24 consecutive months during which the individual has not provided nursing or nursing related services for monetary compensation, the individual must complete a new training and competency evaluation program or a new competency evaluation program.

#### Procedure

1. OBRA Registry staff change an expired status to active status only after successful testing results are received from the testing vendor. The process for receiving the test results is the same as receiving test results for a new NA (see section labelled '[Adding a Nurse Aide to the Registry](#)' for more information).
2. The OBRA Registry staff check the STARS registry to confirm the identifying information matches the individual who has re-tested.
3. The STARS database, after receiving the successful test results, will change the individual's status to active and update the expiration date to be two (2) years from the last date tested.



## Updating Registry Content

### Procedure

#### WORK HISTORY

1. STARS automatically changes the status of a NA from active to expired after 24 months with no report of a work history. The NA will remain in expired status until a report of a work history is received, or successful re-testing is completed.
  - a. A nursing facility may report work history for NAs.
  - b. If a NA does not work at a nursing facility, the NA may provide work history of nursing or nursing related services by submitting in writing the start and end dates of any nursing related employment, and the name of the employer.
  - c. If a work history cannot be established for a NA for a 24-month period, the NA will have to re-train and re-test, or re-test, to be eligible to work in a nursing home or facility (see section labelled '[Verifying Re-Training/Re-Testing or Re-Testing of a Nurse Aide with an Expired OBRA Registry Status](#)' for more information).
2. The OBRA staff will update work history in STARS according to the process described in the section labelled '[Processing OBRA Inquiries from Providers/Staffing Agencies](#)', Section 4, a-d for more information.

#### NAME CHANGES

1. When a NA's first or last name does not match the current STARS record, but the SSN and DOB positively identify the person, the OBRA Registry staff request verification from the NA of the name change. Verification could be, but is not limited to, a marriage certificate or court papers verifying the name change.
2. Previous names and aliases are permanently retained in STARS.

#### DELETIONS FROM THE REGISTRY

1. Federal rules ([42 CFR 483.156](#)) prohibit state registries from removing the name of any individual with a finding from their registry, unless the finding is overturned, or the state is notified of the individual's death.
2. After a NA is added to the Washington State OBRA Registry, OBRA Registry staff will not remove that individual from the registry, regardless of the NA's status.

## NATCEP Manager Responsibility

The NATCEP Manager will conduct the following activities in relation to '[Maintaining Registry Content](#)' of this SOP:

1. Train new staff and ensure they can demonstrate they understand this procedure.
2. Conduct periodic reviews of this procedure to ensure staff are following it correctly.
3. Request training or clarification from headquarters as needed.

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## B. [Inquiries to the Registry](#)

### Background

Federal regulations ([42 CFR §483.35](#)) require nursing homes to receive registry verification the individual has met competency requirements prior to hiring the individual unless the individual is a full-time employee in a training and competency evaluation program approved by the state. If the individual can prove that he or she has recently successfully completed a training and competency evaluation program or competency evaluation program approved by the state and has not yet been included in the registry, the facility may hire that individual, but the facility is responsible to follow up to ensure that person actually becomes registered.

The OBRA Registry staff must have a process for providing verification to facilities, and the process must be sufficiently accessible to meet the needs of the public and health care providers promptly.

### Processing OBRA Inquiries from Providers/Staffing Agencies

#### Procedure

1. Inquiries from facilities or staffing agencies must be made on the [Nursing Assistant Registry Inquiry \(DSHS 16-193\)](#) form.
  - a. The form must be typewritten or filled in electronically by the facility and sent to the OBRA Registry program using the following email address: [obraregistry@dshs.wa.gov](mailto:obraregistry@dshs.wa.gov).
2. OBRA staff will return any incomplete or incorrect inquiry forms to the sender without processing the request. The returned request must contain an explanation of what additional or corrected information is needed to complete the verification.
3. Timelines for processing inquiries:
  - a. OBRA staff will complete inquiries regarding new hire and pre-hire individuals within three (3) working days.
  - b. OBRA staff will complete all other inquiries within two (2) working days.
4. Upon receiving an inquiry, OBRA staff will verify the registry status of each NA on the inquiry form and update the registry with new information. For each individual:
  - a. In the STARS database, using the search function, search for the NA by name or SSN.
  - b. Select the person from the search list provided by clicking on the blue person icon. Click on OBRA Registry to open the OBRA Registry page.

**Note: STARS search function will only list 100 entries; if more than 100 exist, use additional identifiers to narrow the search.**
  - c. Using information from the inquiry to update the registry for individuals with active status.
    - i. If the individual is a new hire/pre-hire, add two (2) years to the anticipated date of hire. Use that date to update the expiration date.
    - ii. If the individual is a renewal, add two (2) years to the current date. Use that date to update the expiration date.
    - iii. If the individual is terminating employment, add two (2) years to the last day worked. Use that date to update the expiration date.
  - d. If the selected individual has expired status, OBRA staff will request a work history that verifies the individual worked in a nursing related capacity in the past 24 months (see section labelled '[Updating Registry Content](#)' for more information).
    - i. If a work history is obtained, OBRA staff will add two (2) years to the last verified date of work, and that date becomes the new expiration date. STARS will automatically change the status of the individual from expired to active unless the last date worked plus two (2) years is in the past.
    - ii. If a work history cannot be established for a NA for a 24-month period, the NA will have to re-train and re-test, or re-test, to be eligible to work (see section labelled '[Verifying Re-Training/Testing or Re-Testing of Nurse Aides with an Expired OBRA Registry Status](#)' for more information).

- e. OBRA staff **must not** update the expiration date if the NA has ineligible status. The NA is ineligible to work as a NA in a nursing home, regardless of work history.
  - f. After updating any needed information for an individual, OBRA staff will:
    - i. Record the old expiration date in the note section.
    - ii. Select the “save person” button in the upper left corner of the screen.
5. Developing an inquiry response:
- a. In STARS, use the Provider tab to search for a nursing home or use the Administrative Organization tab for a staffing agency inquiry.
    - i. Type in the name of the provider or staffing agency. Select the name of the facility or agency from the search results. Add additional identifiers, such as an address, if needed to find the provider or staffing agency.
    - ii. Select New Inquiry button.
    - iii. Add the date and time the inquiry was received.
    - iv. Add the NA to the inquiry by selecting the “add person” button. This will open a slide-out panel titled “Link person to inquiry.” Do not use the regular search function.
    - v. Search for the NA using the “Link person to inquiry” slide-out panel, and then select the NA’s name from the search results list. The individual’s name, SSN and status will populate into the inquiry.
    - vi. If additional information about the NA is needed from the facility or agency, such as missing work history, verification of a SSN, verification of a name change, or an anticipated hire date, add a scripted message to the inquiry.
      - Use the talk bubble icon located on the right side of the screen. Clicking on this icon will open a new page with standard scripted messages that can be inserted on the inquiry form to request additional information.
      - Choose the correct message and click on “update and close” to insert the message. The inserted message will apply to the selected NA.
    - vii. Continue to add employees until all individuals an entity is requesting verification about are listed.
    - viii. When finished adding NAs, select save provider, on the left side of the screen.
    - ix. Verify the information is correct and complete by selecting “Open Doc” to preview the form.
    - x. When verification is complete, select the “send” button. STARS will email the form to the provider or agency.
      - If the email is successfully sent, a green paper airplane icon will display in the inquiry log.
      - If an error icon (red triangle) appears, STARS will highlight the error(s) or missing field(s). Correct the errors, verify the form is correct, and select the “send” button to re-send.
      - If a gray hourglass icon appears, the message has not sent. Click on the “send” button to send.

## Processing Out-of-State Inquiries

### Procedure

1. OBRA staff must:
  - a. Respond to all out-of-state inquiries received through United States Post Service (USPS) mail or email.
  - b. Print all email requests.
  - c. Request additional identifiers from the requesting state if the request does not include enough information to identify the NA.
  - d. Respond to all out-of-state requests within two (2) working days of receipt of the inquiry, with a completed inquiry or a request for additional information.
2. If the NA's name is in the registry, OBRA staff must:
  - a. Verify the license status from the [DOH Provider Credential Search](#) website.
  - b. Stamp the document with the date received using the OBRA/RCS stamp (official seal) and the address stamp.
  - c. Verify OBRA status in the STARS database.
    - i. In the STARS database, in the search section, search for the NA by name or SSN.
    - ii. If found, select the appropriate person from the search list provided.
    - iii. Navigate to the OBRA registry page. Select the plus sign under interstate verifications. Fill out the following fields that will populate the screen:
      - Received Date – the date the inquiry was received;
      - Response Date – the date the OBRA program responded to the inquiry; and
      - State responded to – the name of the state making the inquiry.
    - iv. Select the save person button, in the upper left corner.
3. If the NA is not in the OBRA Registry, note that on the documentation.
4. Mail the inquiry results to the requesting state through USPS mail.
5. Results can also be emailed to registries that have provided an e-mail address on their form.

### NATCEP Manager Responsibility

The NATCEP Manager will conduct the following activities in relation to '[Maintaining Registry Content](#)' of this SOP:

1. Train new staff and ensure they can demonstrate they understand this procedure.
2. Conduct periodic reviews of this procedure to ensure staff are following it correctly.
3. Request training or clarification from headquarters as needed.

Part III: [Appendices](#)

A. [Waiver and Appeal Authorities for Disapproval or Loss of NATCEP/CEP Programs](#)

Attachment 1

**WAIVER AND APPEAL AUTHORITIES FOR DISAPPROVAL or LOSS OF NATCEP/CEP PROGRAMS**

*Facilities may seek any of the following in pursuing review of their disapproval or loss of their NATCEP/CEP program.*

Reason for Disapproval	Extended/Partial Extended Survey, CMP, Denial of Payment, Temporary Manager, Waiver of Licensed Nurse	CMP of no less than \$11,995.00 due and payable	Extended/Partial Extended Survey Finding of SQC
Waivers Allowable	NATCEP program, may be offered in (but not by) a SNF or NF if the State – <ul style="list-style-type: none"> <li>i. Determines that there is no other such program offered within a reasonable distance of the facility,</li> <li>ii. Assures, through an oversight effort, that an adequate environment exists for operating the program in the facility, and</li> <li>iii. Provides notice of such determination and assurances to the State long-term care ombudsman</li> </ul>	If the deficiency is not related to Quality of Care for residents – meaning direct hands-on care and treatment that a health care professional or direct care staff furnished to a resident.	
Appeal Rights			Appeal of Level of Non-compliance - <a href="#">42 CFR § 498.3(b)(14)(i)(ii),(b)(16)</a>
Who Determines	State determines, does not require CMS approval.	State Recommends/CMS Regional Office Determines	SNF only and SNF/NF Departmental Appeal Boards (DAB) determines. NF only-State determines
Authority	Sections <a href="#">1819(f)(2)(C)</a> and <a href="#">1919(f)(2)(C)</a> of the Social Security Act	<a href="#">1819(f)(2)(B)(C)</a> , <a href="#">42 CFR § 483.151</a>	<a href="#">42 CFR § 498.3(b)(14)(i)(ii),(16)</a>

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## B. [Resources and Forms](#)

### [Resources](#)

1. Registry View Basics in the [STARS Manual for OBRA Registry](#)
2. OBRA Registry Inquiry in the [STARS Manual for OBRA Registry](#)
3. [42 CFR §483](#)
4. [Nurse Aide Registry web page](#)
5. [Abuse, Neglect and Exploitation CMS booklet](#)

### [Forms](#)

1. [Nurse Aide Registry Inquiry \(DSHS Form 16-193\)](#)

## C. Glossary of Terms

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**Active status (OBRA)** – means the individual has successfully completed a training and competency program meeting federal requirements. They must have worked in a nursing or nursing related capacity for compensation within the past 24 months and must not have actions or findings that render them ineligible.

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**Agency** – State agency

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**Department** – This term refers to the Washington state Department of Social and Health Services (DSHS).

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**Expired status (OBRA Registry)** – means the individual has not performed nursing or nursing-related services for a period of 24 consecutive months for monetary compensation. If no work history in the past 24 months is established, the individual with expired status is not eligible to work in the nursing home setting, unless or until, they successfully re-train and re-test, or re-test. If they successfully re-test, the expired status returns to active status.

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**Ineligible status (OBRA Registry)** – means there is a state disciplinary action or findings of abuse, neglect, or misappropriation of property in WA state or any other state. Individuals with ineligible status are not eligible to work in the nursing home setting unless reassigned by a state nursing home survey and certification agency as eligible based on the finding or action being overturned.

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**Nurse's Aide, Nursing Assistant-Certified** – refers to the individuals on the OBRA Registry or applying to be on the registry. The terms are interchangeable.

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**Nursing facility (NF)** – a nursing home, or any portion of a hospital, veterans' home, or residential habilitation center, that is certified to provide nursing services to Medicaid recipients under [section 1919\(a\)](#) of the federal Social Security Act. All beds in a nursing facility are certified to provide Medicaid services, even though one or more of the beds are also certified to provide Medicare skilled nursing facility services.

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**Omnibus Budget Reconciliation Act (OBRA) of 1987** – Provisions set forth in law regarding the use of nurse's aides. In addition to nurse aide training requirements, the act specifies that each state must have a registry for nurse aides.

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**Omnibus Budget Reconciliation Act (OBRA) Registry** – A registry containing information related to all individuals who have successfully completed a nurse aide training and competency evaluation program and found by the State to be competent to function as a nurse aide or who may function as a nurse aide because of meeting criteria in [42 CFR §483.150](#).

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**Requirement** – Any structure, process, or outcome that is required by law or regulation.

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**Scope and severity** – The effect of non-compliance on a resident (severity) and the number of residents actually or potentially affected (scope) by the provider's non-compliance. Illustrated in the deficient practice statement and supported in the findings.

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**Skilled nursing facility (SNF)** – a nursing home, a portion of a nursing home, or a long-term care wing or unit of a hospital that has been certified to provide nursing services to Medicare recipients under [section 1819\(a\)](#) of the federal Social Security Act.

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**Testing Vendor** – The testing company contracted by DOH to administer NA-C competency tests.

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**Working days (business days)** – defined as Monday through Friday, excluding federal and state holidays.

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#### D. [Acronym List](#)

AL TSA	Aging and Long-Term Support Administration
CEP	Competency Evaluation Program
CFR	Code of Federal Regulations
CHOW	Change in Ownership
CI	Complaint Investigator
CMAR	Case Mix Accuracy Review
CMP	Civil Monetary Penalty
CMS	Center for Medicare and Medicaid Services
DOB	Date of birth
DOH	Department of Health
DSHS	Department of Social and Health Services
e-CFR	Electronic Code of Federal Regulation
FM	Field Manager
NA	Nurse's Aide
NAC	Nursing Assistant-Certified
NATCEP	Nursing Aide Training and Competency Evaluation Program
NCQAC	Nursing Care Quality Assurance Commission (NCQAC)
NF	Nursing Facility
NH	Nursing Homes
OBRA	Omnibus Budget Reconciliation Act
PC	Perceptive Content
RA	Regional Administrator
RCS	Residential Care Services
RCW	Revised Code of Washington
SNF	Skilled Nursing Facility
SOP	Standard Operating Procedures
SQC	Substandard Quality of Care
SSN	Social Security Number
STARS	Secure Tracking and Reporting System
USPS	United States Postal Service
WAC	Washington Administrative Code
WD	Working Day

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#### E. [Change Log](#)

Eff. Date	Chapter/ Section #	Description of Change	Reason for Change	Communication and Training Plan
07/13/2023	Full Chapter	Updated format Added NATCEP Section	Update format of the SOP Provide guidance to staff related to NATCEP	MB R23-062
11/10/2020	Full Chapter	Establishment of Chapter 26	Provide guidance to staff	<a href="#">MB R20-139</a>

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