



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

February 12, 2026

HCLA: NH #2026-006

Revisions to the State Operations Manual (SOM) Chapters 5 and 7

Dear Nursing Facility/Home Administrator:

This letter is to inform you of the recent revisions made by the Centers for Medicare & Medicaid Services (CMS) to **SOM Chapter 5** - Complaint Procedures and **Chapter 7** - Survey and Enforcement Process for Skilled Nursing Facilities and Nursing Facilities.

CMS is continually improving oversight and enforcement in cases of non-compliance with federal laws and regulations. The SOM Chapters serve as the primary guides for regulatory compliance, ensuring that nursing homes (NHs) meet federal standards for quality care, safety, and operational procedures.

On January 30, 2026, CMS released [QSO-26-03-NH](#), revising SOM Chapters 5 and 7 to align instructions and guidance with current policies in Quality, Safety & Oversight (QSO) memoranda and established practices. These revisions, which will go into effect **March 30, 2026**, include the following updates:

Chapter 5 of the SOM:

- Revisions to Immediate Jeopardy (IJ) Priority Definition examples for NHs; and
- Clarification of Off-site investigations.

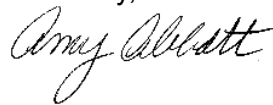
Chapter 7 of the SOM:

- **Nurse Staffing Waivers and Resident Room Variances:** Outlines a process for NHs to attain a waiver and is not associated with the survey process. CMS is moving this guidance from Appendix PP to Chapter 7.
- **Onsite vs. Off-site revisits:** Clarifies procedures for conducting revisits after surveyors identify non-compliance.
- **Immediate Jeopardy:** Updates guidance on identifying IJ, determining when it has been removed, and outlining conditions for lowering the severity level once IJ has been removed.
- **Acceptable Plan of Correction:** Addresses an Office of the Inspector General (OIG) recommendation to clarify areas related to the acceptable plans of correction after a facility was found to be non-compliant with the requirements for participation.
- **Enforcement Guidance:** Revises policies for Civil Money Penalties (CMP) to match current practices, using the CMP Analytic Tool and adjusting CMP amounts yearly as per the Annual CMP Inflation Adjustment Act of 2015. Updates also align with the Fiscal Year 2025 Skilled Nursing Facilities Prospective Payment System final rule, enhancing CMS' power to impose CMPs for health and safety deficiencies.

- **Civil Money Penalty Reinvestment Program:** Clarifies how CMP funds can and cannot be used, the application review process, and reporting requirements. Also notes that State CMP Fund Balances will be publicly posted. These revisions were made to align with the release of [QSO-25-26-NH](#).
- **Informal Dispute Resolution (IDR):** Aligns IDR procedures with the Independent IDR (IIDR) process and adds guidance on uploading deficiencies pending IDR or IIDR to the CMS record-keeping system to improve transparency.
- **Additional information:** Includes guidance previously found in Appendix P of the SOM, along with technical changes that include updates for accurate references.

If you have any questions, please contact RCSpolicy@dshs.wa.gov.

Sincerely,



Amy Abbott, Director
Residential Care Services

DSHS: *“Partnering with People”*

Related References: [QSO-26-03-NH](#) (SOM Chapters 5 and Chapter 7), [QSO-25-26-NH](#)