

Report in Brief

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U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
OFFICE OF INSPECTOR GENERAL



Why OIG Did This Review

Federal regulations require nursing and skilled nursing facilities (nursing homes) to submit correction plans to the Centers for Medicare & Medicaid Services (CMS) or to their respective State agency for certain deficiencies identified during surveys. State agencies must verify the correction of identified deficiencies by obtaining evidence of correction or through onsite reviews. This review of the State agency in Nebraska is part of an ongoing series of reviews of States' verification of correction of deficiencies.

Our objective was to determine whether Nebraska verified that nursing homes in the State corrected deficiencies identified during surveys in calendar year (CY) 2016 in accordance with Federal requirements.

How OIG Did This Review

We selected a stratified random sample of 100 deficiencies associated with 70 nursing homes and reviewed State agency documentation.

Nebraska Did Not Always Verify Correction of Deficiencies Identified During Surveys of Nursing Homes Participating in Medicare and Medicaid

What OIG Found

Nebraska did not always verify nursing homes' correction of deficiencies identified during surveys in CY 2016 in accordance with Federal requirements. We estimated that Nebraska did not obtain or maintain the nursing homes' evidence verifying correction of deficiencies for 92 percent of the deficiencies identified during surveys in CY 2016.

For the sampled deficiencies, Nebraska did not have documentation supporting that it had verified the nursing homes' correction of 83 deficiencies. Specifically, Nebraska did not obtain or maintain sufficient evidence of correction for 66 less serious deficiencies (for which correction plans verifying that corrections have been made must be submitted and approved) and for 17 other, more serious deficiencies (which require followup surveys to determine that corrections have been made). Evidence of correction that may have been on record for these more serious deficiencies was stored in electronic files that could not be opened or were missing.

What OIG Recommends and Nebraska Comments

We recommend that Nebraska revise its policies to (1) require nursing homes to include evidence of correction with all submitted correction plans for deficiencies at or above the level of seriousness designated in Federal requirements and (2) ensure that this evidence is retained by the State. We also recommend that Nebraska maintain accessibility of, and the ability to read, survey data documentation in accordance with changes in technology.

Nebraska described corrective actions that it said it had implemented. Nebraska asserted that for less serious deficiencies, acceptance of a nursing home's plan of correction constituted acceptable evidence of correction; Nebraska also pointed to an operational dysfunction in CMS's electronic system. Regarding the more serious deficiencies, Nebraska disputed that both it and we were unable to open the electronic files containing evidence of correction. Nebraska said that its staff accessed CMS's secure software and provided the information to us. We maintain that our findings and recommendations remain valid. A nursing home's submission of a plan of correction does not relieve a State of its responsibility to verify that previously identified deficiencies have been corrected. Evidence of correction that Nebraska provided was limited and generally came from only one information source, but the State agency procedures require verification from at least one additional information source.