March 5, 2020

Dear AAAHC Medicare Deemed Status Accreditation Program Participant,

Patient and employee safety is our first priority. It is core to the AAAHC mission and drives our actions.

I am sending this message to inform you of a directive we’ve received that may impact the survey services AAAHC provides to your organization. Yesterday, the Centers for Medicare & Medicaid Services (CMS) directed deemed accrediting organizations to suspend all non-emergency survey inspections. While CMS is pursuing this directive to allow inspectors to focus their energies on addressing the spread of COVID-19 beginning with nursing homes and hospitals, they are extending it to all care settings.

Effective immediately, among MDS-certified or accredited organizations, CMS has limited survey activity to the following:

- All immediate jeopardy complaints (i.e., cases that represent a situation in which entity noncompliance has placed the health and safety of recipients in its care at risk for serious injury, serious harm, serious impairment or death or harm) and allegations of abuse and neglect
- Complaints alleging infection control concerns, including organizations with potential COVID-19 or other respiratory illnesses
- Any re-visits necessary to resolve current enforcement actions (i.e., Medicare Follow-Up Surveys)
- Initial accreditations for purposes of obtaining initial CMS certification (including Early Option Surveys)
- Surveys of organizations that have a history of infection control deficiencies

Should any of the above criteria apply, your organization may still experience a Medicare Deemed Status (MDS) survey during this activity suspension period.

Consistent with AAAHC Standards of compliance, all organizations across all settings should remain vigilant about practices that impact employee and patient safety and the quality of care delivered. This includes:

- Utilize AAAHC Standards (Chapters 7.I, 7.II and 8) to conduct a thorough, objective gap assessment to identify areas of risk and needed improvement.
- Develop and immediately implement a corrective action plan that prioritizes transmission-based precautions. Involve your entire staff in this process including providing education on infection prevention and control strategies.
- Leverage resources available to you (see below) to address questions, identify solutions, and provide support.
- Rigorously follow your surveillance program.
- Ensure communication with State and Local health authorities.

With our focus on ambulatory care, AAAHC believes that excellent quality infection prevention and control practices are essential to quality, safe patient and employee care, consistent with our 1095 Strong commitment. Good practices mean full compliance with hand hygiene, effective patient pre-screening, proper use of PPE, compliance with human resource policies for employee illness, and ongoing surveillance. For additional resources, refer to the CDC links below:

Hand Hygiene
Strategies for Optimizing the Supply of N95 Respirators
Evaluating and Reporting Persons Under Investigation (PUI)
Healthcare Personnel Should Know
Some organizations may be nearing their accreditation expiration/anniversary date. CMS recognizes the dynamic nature of this situation and intends to provide additional guidance. Until we hear further from CMS and as long as you maintain compliance with AAAHC and CMS Standards, we expect that your accreditation will be extended accordingly. Please note that the CMS suspension does not impact the application process. Continue to submit your application to AAAHC consistent with routine processes and timelines.

Thank you for your ongoing commitment to 1095 Strong. quality every day.

Regards,

Noel M. Adachi
President & CEO