

MEMORANDUM

Department of Aging and Disability Services (DADS) Regulatory Services Policy * Survey and Certification Clarification

TO: Regulatory Services
Regional Directors and State Office Managers

FROM: Veronda L. Durden
Assistant Commissioner
Regulatory Services

SUBJECT: **S&CC 07-22 – Provider Signature for Plans of Correction**

APPLIES TO: **Nursing Facilities, Intermediate Care Facilities for Persons with Mental Retardation or a Related Condition, Assisted Living Facilities, Adult Day Care Facilities, and Home and Community Support Services Agencies**

DATE: **October 23, 2007**

The purpose of this memorandum is to clarify information received from the Centers for Medicare and Medicaid Services (CMS) in regard to provider signatures on the Form CMS-2567 when there are no deficiencies cited. CMS stated that the State Operations Manual is silent on whether a provider should sign and return a copy of the Form CMS-2567 when no deficiencies were cited by the state Survey Agency. Therefore, effective immediately, there is no requirement from DADS that the provider sign and return the Form CMS-2567 when there are no deficiencies cited. This also applies to DADS Form-3724 for licensing standards and State Standards for Participation.

For questions concerning this memorandum, please contact a program specialist in the Policy, Rules, and Curriculum Development Unit at (512) 438-3161.