



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Medicare and Medicaid Notice to the Public

Notice is hereby given that on August 15, 2022 the Centers for Medicare & Medicaid Services (CMS) will terminate the agreement between the Secretary of Health and Human Services and AHMC Seton Medical Center, Daly City, California as a skilled nursing facility in the Medicare program. In addition, as authorized by the California State Medicaid Agency, notice is given that the provider's agreement as a nursing facility in the Medicaid program will also be terminated effective August 15, 2022.

CMS has determined that AHMC Seton Medical Center has failed to attain substantial compliance with the following Medicare and Medicaid participation requirements:

- 42 CFR § 483.10 –Resident Rights
- 42 CFR § 483.12 –Freedom from Abuse, Neglect, and Exploitation
- 42 CFR § 483.21 –Comprehensive Resident Centered Care Plans
- 42 CFR § 483.25 – Quality of Care
- 42 CFR § 483.60 –Food and Nutrition Services
- 42 CFR § 483.80 –Infection Control
- 42 CFR § 483.90 –Physical Environment

The Medicare program will not make payment for skilled nursing facility services furnished to residents admitted to the facility on or after April 9, 2022. For residents admitted prior to April 9, 2022, payment may continue for up to 30 days of services on or after August 15, 2022, which is the date of termination.

In addition, Federal Financial Participation will not be available to the State for any Medicaid residents admitted to the facility on or after April 9, 2022. For Medicaid residents admitted prior to April 9, 2022, Federal Financial Participation may continue to be made to the State for up to 30 days of covered services to qualified residents furnished on or after August 15, 2022, the date of termination.

This action is mandated by Sections 1819(h)(2)(C) and 1866(b)(2) of the Social Security Act and Federal regulations at 42 CFR §§ 488.412 and 488.456. If the provider demonstrates substantial compliance with all CMS requirements, and a revisit survey confirms substantial compliance, prior to August 15, 2022, the provider will remain active in the Medicare Program and CMS will not terminate their provider agreement.

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Survey & Operations Group